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**A qualitative case study of the clinical educator role during a
pilot year of implementation**

Sherrill, Julie Anne, Ph.D.

The Ohio State University, 1993

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300 N. Zeeb Rd.
Ann Arbor, MI 48106

**A QUALITATIVE CASE STUDY OF THE CLINICAL EDUCATOR ROLE
DURING A PILOT YEAR OF IMPLEMENTATION**

DISSERTATION

**Presented in Partial Fulfillment of the Requirements
for the Degree of Philosophy in the
Graduate School of The Ohio State University**

By

Julie Anne Sherrill, B.S., M.A.

*** * * * ***

The Ohio State University

1993

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CHAPTER I

INTRODUCTION

Once upon a time a number of mice called a meeting to decide on the best means of ridding themselves of a cat that had killed so many of their friends and relations. Various plans were discussed and rejected, until at last a young mouse came forward and proposed that a bell should be hung round the tyrant's neck, that they might, in the future, have warning of her movements and be able to escape.

The suggestion was received joyfully by nearly all, but an old mouse, who had sat silent for some time, got up and said: "While I consider the plan to be a very clever one and feel sure that it would prove to be quite successful if carried out, I would like to know who is going to bell the cat" (An Aesop fable found in Barth, 1991, p. 128).

One of the more popular solutions to the nation's challenge of reforming its public education system has been to propose the creation of more collaborative and authentic relationships between schools and universities, while at the same time establishing new roles for teacher leaders and improving teacher education. Inherent in this appealing rhetoric is the reality that the solutions for reforming education must be undertaken by people; people, who as the fable suggests, might be viewed as volunteers sent to "bell the cat". After all, inventing new roles and tackling the restructuring and transformation of schools is not for the faint at heart.

This qualitative case study was designed to record the experiences, frustrations and successes of four teachers who stepped forward to "bell the cat" by assuming pilot clinical educator roles. The roles were directly associated with a professional development school project initiative within a college of education at a major land grant research university and the urban and suburban school districts in its surrounding area.

BACKGROUND OF THE PROBLEM

The past decade has brought forth a veritable landslide of reform movements in education. Consider the fact that we have witnessed more educational reform reports, more school reform agendas introduced by governors and legislators, more attention to education by the media and more philanthropic funding of K-12 school reform initiatives than in any comparable time period of our nation's history (Goodlad, 1990). Simply put, the problems of public education in this country have been thrust into the limelight and a culprit most often identified by the never-ending supply of official reports is teacher education.

A call for change in teacher education (1985); Improving teacher education: An agenda for higher education and the school (1985); Who will teach our children? (1985); and Visions of reform: Implication for the education profession (1986) are just a representative sampling of the reports generated during the past ten years. Like a battered ship in a storm tossed sea, teacher education has had two major beacons by which many have attempted to navigate a course for the future. The Holmes

Group report, Tomorrow's Teachers (1986), and the Carnegie Task Force on Teaching as a Profession report, A Nation Prepared: Teachers for the 21st Century (1986) have been the guiding focus for changing course.

Both reports indicate displeasure with the working conditions of teachers, both endorse differentiated staffing, and both agree that teachers at different levels ought to be paid salaries commensurate with such levels. More significantly as it relates to this study, both groups suggest that professional teacher education ought to be extended into the graduate school, after the prospective teacher receives a bachelor's degree in arts and sciences. A final common thread is the call for professional development schools (Holmes), or in the case of Carnegie - clinical schools. (See chapter two for a more thorough description.)

Field-based teacher education programs, at the pre-service, induction or in-service level, should blend the best of theory and practice. However, such a task cannot be carried out successfully by universities or school systems alone, both need to be involved (Watson and Fullan, 1992). The concept of teachers as professionals is an essential element of the Professional Development School rationale (Carnegie, 1986; Holmes, 1986; Levine and Gendler, 1988; Whitford and Hovda, 1986). Teachers are viewed as knowledgeable and committed professionals who seek a greater voice in decisions affecting their work and who, in return, are willing to accept responsibility for these decisions. This view of teacher professionalism also implies greater differentiation among teacher roles, thereby providing time for collegial decision-making, classroom research and mentoring of new teachers

(Nystrand, 1991). Clinical educator roles are an example of how relationships and responsibilities among university faculty and K-12 educators are being reexamined and redesigned.

THE PURPOSE AND SIGNIFICANCE OF THE STUDY

A review of the literature, which included a search for current university programs utilizing "clinical faculty", revealed that very few current arrangements move beyond a renaming of the cooperating teacher role. In fact, little has been reported regarding actual working partnerships between universities and schools. As Goodlad (1991) points out, it has become increasingly obvious that there is an absence of models from which to study and learn. It is therefore imperative that when attempts at formulating new roles and relationships between universities and schools are made, the experiences are recorded and studied. As a profession, we have often failed to learn from past experiences (Sykes, 1984; Coley and Thorpe, 1986; Johnson, 1987; Zeichner, 1988, and Herbst, 1989). An effort must be made to alter such habits.

Critical to the successful operation of professional development school (PDS) projects in the research setting were specific role definitions for university faculty and school-based teacher educators who together were to sustain the professional development activities undertaken in each of the PDS sites. Of particular importance was the selection of an organizing title and role definition that reflected direct university affiliation for school-based educators.

As with any normal labor experienced during the birth of an infant, new roles bring forth new challenges, opportunities, excitement and discomfort. The purpose of this study was to learn about the unique challenges encountered by K-12 classroom teachers selected to serve in pilot clinical educator roles at a major land-grant research university, and who worked in association with professional development school initiatives initiated by the college of education and surrounding school districts.

The research questions which guided this study were as follows:

1. What are the clinical educators' perceptions of the tasks and responsibilities assumed in these new roles?
2. What are the clinical educators' perceptions of tensions and barriers created through the evolution of these new roles?
3. What are the clinical educators' perceptions of the cultures and conditions of service?

DEFINITION OF TERMS

For the purpose of this research study the terms listed below are defined as follows:

Clinical Educator:

A school-based teacher educator who continues a significant role in the classroom while also assuming responsibility for certain aspects of teacher development, including observation and feedback, program development and instruction relative to initial teacher preparation, entry year support and continuing teacher professional development. Service in this role would be directly tied to professional development responsibilities in the college of education, as well as enhance school-based professional development (College Document, 1992).

Holmes Group:

A consortium of nearly 100 American research universities committed to making the program of teacher preparation more rigorous and connected -- to liberal arts education, to research on learning and teaching, and to wise practice in the schools (Holmes, 1986, preface).

Professional Development School:

A term used to describe the collaborative connection between a university-based education school to one or more public [private, parochial] elementary and secondary schools (Holmes, 1990, viii).

PDS Project Co-Coordinator:

A term used within the research setting and that applies to certain individuals from the college and the schools who assumed leadership for individual professional development school projects. The individuals, typically, were university faculty and either a teacher leader or school principal. In some instances the clinical educator from the project also served as the co-coordinator. PDS project co-coordinators from every site met monthly to discuss issues relative to the overall PDS initiative in the college.

Cooperating Teacher:

A term used to describe teachers who "participate in teacher education at the school site and who have been given considerable responsibility for the monitoring and mentoring of teacher candidates in initial and early field experiences and in the observation and participation experiences required of general and pedagogically content-specific field experiences" (Zimpher, 1990, p. 47).

THE METHODOLOGY

The dynamics involved in learning how individuals adapt to new environments and professional responsibilities are complex. Such an exploration lends itself to a naturalistic method of inquiry and the utilization of a case study method.

A qualitative case study seeks to holistically describe a unit in depth, detail and context (Patton, 1990). Robert Stake (1988) explicates how case studies can contribute both theoretically and pragmatically in educational research. Patton (1990) points out that it is more desirable to have a few carefully done case studies with results one can trust than to aim for large, probabilistic, and generalizable samples. This case study focused on the interpretations, actions and understandings of the participants involved. According to Van Manen (1990) "A good phenomenological description is collected by lived experience and recollects lived experience--is validated by lived experience and it validates lived experience" (p. 27).

Data for the study were gathered in two phases; primary and supplementary. The primary phase of the data collection involved the accumulation of case study data from four participants. Out of a potential sample of nine clinical educators, four participants were selected based on the focus of the professional development school project with which they were involved, as well as their diversity from one another relative to site location, gender, age, subject matter specialty and years of teaching experience. In addition to in-depth interviews and observations, autobiographical sketches were collected from each participant as well as reflective journals recorded by the participants throughout the course of their clinical educator experience.

The supplementary phase consisted of collecting data from individuals associated with the clinical educators in both of their professional settings; the school and university. These data were collected through interviews.

LIMITATIONS OF THE STUDY

The results of this research study apply to the subjects, settings, and situations described in each profile. For each participant profile, the researcher was limited by the amount of time spent in the setting, the number of times that the teachers could be interviewed, and the number of additional colleagues that could be interviewed. The researcher spent approximately eight to ten hours interviewing each participant.

ORGANIZATION OF THE STUDY

The study will be presented in five chapters. Chapter I contains the introduction of the problem including the significance of the study, a definition of terms, and the limitations of the study.

Chapter II provides a brief historical sketch of teacher education reforms during the past century, a more detailed examination of contemporary reform agendas, a discussion of the tensions long associated within the field of teacher education, a review of how clinical faculty are currently being used at universities across the country, and finally, a discussion of the literature regarding teacher leadership.

Chapter III presents the design of the study including the study population and research questions, a description of the procedures for collecting and analyzing information and an exploration of the rationale that supports such a process.

Chapter IV presents the primary and supplementary data. The chapter contains an analysis of the patterns, stages and activities shared by participants which is presented in the form of individual profiles. This chapter also presents major

categories of descriptive data and emerging themes by engaging in an analysis across participant profiles.

Chapter V summarizes the findings of the dissertation and presents conclusions and recommendations for further study.

CHAPTER II
REVIEW OF THE LITERATURE
INTRODUCTION

In order to better understand the context in which clinical educator roles were implemented, this chapter is developed around three major areas. First, a brief historical sketch of various teacher education reforms during the past century, as well as a more detailed examination of contemporary reform agendas and their call for increased collaboration between K-12 schools and universities will be provided. The chapter will then delineate the tensions long associated (and researched) within the field of teacher education, particularly as they pertain to the supervision of student teachers in field settings and the various uses of what will be termed clinical faculty. Finally, the chapter concludes with a discussion of teacher leadership; an area where important connections need to be made between the body of literature and the scope of this particular research study.

LESSONS FROM THE PAST

In a lecture delivered over 150 years ago, Horace Mann, Secretary of the Massachusetts Board of Education (Mann, 1929) spoke of the need to "provide a

means for the special qualification of teachers for our Common Schools" in order to "elevate the character of the common schools and increase their efficiency" (p.263). Mann went on to say, "...that each teacher ought to know vastly more than he or she is required to teach and that every teacher should know by what means the human powers and faculties are strengthened and weakened" (1929, p. 265). Little did Mann realize that he was framing the context for discussions that would continue through the 20th century. Adequate teacher qualification, the role of pedagogy in teacher preparation, and specialized or general academic content have been a mainstay of intellectual arguments and educational research since Mann delivered his message.

In comparison to medicine and law, one might view education as a relatively new profession. Even so, there is a rich history that can be drawn upon in teacher education. The historical perspective that will be provided here is a means of creating awareness and offering acknowledgement of what has come before. The following passages do not attempt to provide the reader with a comprehensive record of the history of teacher education in this country, but rather offer an overview of what has occurred in this century relative to research studies, reports and special programs aimed to "reform" the field of teacher education.

Social and economic conditions and teacher supply have historically played a major role in teacher education design and the internship experience for preservice students. The period of 1900-1930 America was characterized by progressive social conditions, an inflationary economy and dramatically increased secondary school enrollments (Bents and Howey, 1979). A severe teacher shortage caused the student

teaching internship to become a vital part of the preservice education of teachers and was established as a one year extension of the two year normal school program. Normal schools had been established to better prepare teachers and in so doing moved teaching from a part-time occupation to a professional career (Herbst, 1989). Actual supervision of the interns was minimal and there was limited articulation of the program between the normal schools and the cooperating public schools (Bents and Howey, 1979).

An interesting footnote to this era was an exception to the internship program established at Brown University (Jacobs, 1909). The internship extended beyond the B.A. or B.S. degree and was structured by five principles established by the National Society of Colleges of Teacher Education:

1. The intern will serve in a professional laboratory facility designed for observation and participation by prospective teachers,
2. The intern will conduct research and experimentation in child growth and development and in the use of instructional materials and teaching procedures,
3. The intern will test and demonstrate forward-looking school practices,
4. The intern will enrich the program of graduate studies in education by providing insights to the practical application of the method of teacher, and
5. The intern will exercise leadership in-service education programs for teachers (Jacobs, 1909, p.533).

The austerity experienced by the country between 1930 and 1940 resulted in very little funds being appropriated to public education (Bents and Howey, 1979). As a result, a large surplus of teachers existed which forced interns to accept employment without salaries. It was during this period that the student teaching

internship moved from preservice (for teachers not yet having a degree) to more inservice (for teachers with a normal school certificate or college degree, as in the model piloted at Brown). In addition, supervision moved more from the hands of training institutions to the public schools (Jones, Cres & Carley, 1941).

A currently familiar theme can be found if one looks back to the 1950's and 1960's. At that time the newly established Ford Foundation funneled incredible amounts of grant money into university teacher education programs with the goal of bypassing traditional certification requirements and promoting fifth-year programs, such as the Master of Arts in Teaching (Bush, 1987). Other efforts included New Horizons for the Teaching Profession (Lindsey, 1961), a report of the National Commission on Teacher Education and Professional Standards (NCTEPS), a then active professional division of the National Education Association; The Education of American Teachers (Conant, 1963), a major inquiry by James B. Conant of Harvard University and underwritten by the Carnegie Foundation for the Improvement of Teaching that looked at the misunderstandings which contributed to the antagonism between liberal arts and education professors, the academic preparations of teachers as it existed, and the state of the theory and practice of teaching; and Teachers for the Real World (Smith, Cohen, and Pearl, 1969), a study by the American Association of Colleges for Teacher Education in which a plan was presented to "prepare teachers for all children, regardless of their cultural backgrounds or social origins" (p. ix). Not to be outdone, the "academicians" of the university became more vocal during this time period. They expressed disdain for pedagogical matters and issued reports

indicating that the subject matter to be taught was of the utmost importance and had been sorely neglected. The book *Educational Wastelands* (1953), by Arthur Bestor, reflected such views and set the stage for the national panic that ensued when the Russians launched Sputnik I in 1958. America's schools appeared to be "falling behind" and further action was required.

The call for further action resulted in an increased involvement of the federal government in higher education; an involvement which characterized much of the 1960's and 1970's. Up until this time the major efforts at reforming teacher education had been derived primarily from the private sector, especially philanthropic foundations (Bush, 1987). The federal efforts can be characterized in the following three examples, all of which were to be a part of an attempt to build the Great Society.

First, an effort was made to build a national educational research and development capacity, comparable to what had taken place over the past century in business and agriculture. The attempt materialized in the form of regional educational laboratories and research and development centers, all of which dealt with the problems of teacher education in one way or another. A major impetus to performance-based teacher education was also gleaned from this effort (Bush, 1987)

On a second front the federal government launched, and continued for fifteen years, the Teacher Corps, which had as a primary objective the recruitment of liberal arts graduates with little or no undergraduate preparation in education into intern-type teacher education programs (Bents and Howey, 1979). The look of internships had

once again changed based on the need for teachers and the increased involvement of the federal government in higher education.

A third major federal effort was the Beginning Teacher Evaluation Study. The bulk of the work involved in this study was conducted by the Educational Testing Service and the Far West Laboratory for Education Research and Development, both of whom were under contract with the California Teacher Preparation and Licensing Commission (Denham and Lieberman, 1980).

The decade of the 1960's also produced a book by Robert J. Schaefer entitled, *The School as a Center of Inquiry*, which unknowingly predicted what would become the focus of attention twenty years hence. Schaefer began:

We can no longer afford to conceive of the schools simply as distribution centers for dispensing cultural orientations, information, and knowledge developed by other social units. The complexities of teaching and learning in formal classrooms have become so formidable and the intellectual demands upon the system so enormous that the school must be much more than a place of instruction. It must also be a center of inquiry, a producer as well as transmitter of knowledge...university schools of education alone...probably cannot produce the requisite new knowledge. They must be joined in the quest by schools especially organized for the task of inquiring (1967: 1-2).

This review of some of the many reports and studies published during this century illustrate that the themes presented in Mann's lecture on the "special preparation" of teachers are timeless. Keeping that in mind, let us move to a discussion of some the major teacher education reform movements of the 1980's.

THE CURRENT EDUCATIONAL REFORM ARENA

Change is alive and kicking in teacher education. To emphasize the point one only has to cite the numerous responses to the issue that have evolved over the past seven or eight years: the National Board for Professional Teaching Standards; the Holmes Group; the Center for Educational Renewal, alternative routes to teacher licensing; teacher education programs for mid-career professionals; and bills in Congress that propose new versions of older programs such as the Teacher Corps (Meade, 1991).

Just as a single falling rock can initiate an enormous avalanche, the report entitled A Nation At Risk (1983) began its own "landslide" of blue-ribbon committees, presidential commissions and research studies. Public education in this country was identified ten years ago as being in extreme trouble, and the culprit most often identified by the never-ending supply of official reports was teacher education.

A Nation at Risk (1983) was followed by reports from the College Board and the American Council on Education. The American Association of Colleges for Teacher Education (AACTE) provided a model for improving teacher preparation in Educating a profession: Profile of a beginning teacher, published in 1983, while a year before, the NEA had issued its call for reform in Excellence in our schools, teacher education: An action plan (1982). Other teacher education reform reports included the National Commission for Excellence in Teacher Education's A call for change in teacher education (1985), the Southern Regional Education Board's Improving teacher education: An agenda for higher education and the school (1985),

and the California Commission on the Teaching Profession's Who will teach our children (1985)?

Not all of the teacher education reform reports contain comparable recommendations, nor are they always compatible with one another. What is important is the shared focus of the reports: our nation's teachers.

Two major reports that have received the most attention nationally are Tomorrow's Teachers: A Report of the Holmes Group (1986), and A Nation Prepared: Teachers for the 21st Century (Carnegie Task Force, 1986). Each report has its own particular design for the improvement of teacher education, but common themes can be traced in each. These themes include improving schools as workplaces for professionals as a method of improving teacher quality, improving the teaching context for both student teachers and first-year teachers, creating more authentic relationships between colleges of education and public schools, and determining a model of effective teaching and teacher preparation programs (Keith, 1987).

The Holmes Group's efforts began in 1983 with informal conversations among a handful of education deans regarding quality standards for the accreditation of teacher education programs. Between 1983 and 1986 the conversations and correspondence broadened in scope. A national study group of 40 education deans and professors convened to discuss the causes of national dissatisfaction with American schools, teaching, and teacher education. The group concluded that the achievement of higher levels of learning for our nation's children would only come from changing the entire occupation of teaching, rather than just teacher education

programs. They began to formulate reforms that would be much more than cosmetic, they would be structural and would be undertaken by research universities in cooperation with elementary and secondary schools (The Holmes Group, 1991).

By May of 1986, the study group which was now calling itself The Holmes Group (named after a former Dean of Education at Harvard University) had published Tomorrow's Teachers. The first of three Holmes Group reports, Tomorrow's Teachers set forth the group's vision of good teaching, the obstacles to achieving such a vision, and a recommendation of an action agenda (The Holmes Group, 1991).

Nearly 100 research universities in the United States have now been invited to participate in further development and study pursuant to The Holmes Group goals and reform activities. Why research institutions? The Holmes Group members believe that they possess the crucial resources required to implement deliberate and intensive programs that can devise and test innovative forms of learning, teaching and school organization. Their membership signifies a resolve to apply the unique resources found in research universities towards working with educators so that lasting improvements can be made in our nation's schools.

Tomorrow's Teachers endorses five major goals;

1. To make the education of teachers intellectually sound.
2. To recognize differences in knowledge, skill, and commitment among teachers.
3. To create relevant and defensible standards of entry to the teaching profession.

4. To connect schools of education with elementary and secondary schools in their communities.
5. To make schools better places for practicing teachers to work and learn (1986, p.4).

The second report, the Carnegie Task Force on Teaching as a Profession's A Nation Prepared: Teachers for the 21st Century (1986), looked at teacher education in the larger context of reforming the entire teaching profession. In contrast to Holmes which was made up solely of education deans and professors, the 14 members of the Carnegie Task Force included two business leaders, two governors, one state legislator, one journalist, one consultant, an official of the American Association for the Advancement of Science, two chief state school officers, an expert on Hispanic affairs, two teacher union leaders, and only one dean of education (Carnegie, 1986).

Unlike Tomorrow's Teachers which focuses on teacher education, the report of the Carnegie Task Force on Teaching as a Profession, A Nation Prepared: Teachers for the 21st Century, looks at teacher education only in the larger context of reforming the entire profession of teaching (Tom, 1987). Both reports indicate displeasure with the working conditions of teachers, both endorse differentiated staffing, and both agree that teachers at different levels ought to be paid salaries commensurate with such levels. Both groups suggest that professional teacher education ought to be extended into graduate school, after the prospective teacher receives a bachelor's degree in the arts and sciences. A final common thread is the call for professional development schools (The Holmes Group), or in the case of

Carnegie--clinical schools. Both groups believe fundamental reform can occur only if a cluster of reforms is initiated and pursued.

As should be expected in any healthy environment of scholarly inquiry, there have been critics of the reports. Pinar (1989) argues that the Holmes proposals are in the political best interests of education faculties. Shifting responsibility for undergraduate learning to colleagues in arts and sciences alters the political responsibility for the quality of those students who graduate from their disciplines and enter education. In addition, creating clinical faculty from colleagues in the schools to teach methods courses and supervise student teachers or interns helps shift political responsibility to existing teachers. Reducing the number of coursework hours that universities have teacher education students reduces the responsibility of teacher educators.

Others noted that Tomorrow's Teachers (1986) lacked an understanding of reform history (Johnson, 1987; Cuban, 1987), realistic solutions to what is a "sophisticated analysis" of the problem (Tom, 1986), and insufficient justification for eliminating undergraduate programs (Engel, 1989; Raywid, 1987; Tom, 1987; Travers and Sacks, 1989). But as Howey and Zimpher (1986) observed, the efforts to take leadership in the reform of teacher education programs should be applauded (p.47).

SCHOOL-UNIVERSITY COLLABORATION

A second monograph by the Holmes Group, Tomorrow's Schools (1987), supports what began in Tomorrow's Teachers (1986) by reinforcing the idea that the

improvement of teacher education depends on developing pedagogical knowledge and reflective practice in a realistic setting. Thus, Tomorrow's Schools (1987) was created around the recommendation that professional development schools (PDS) be a means of achieving that goal.

As Goodlad observed:

The argument for school-university partnerships proceeds somewhat as follows. For schools to get better, they must have better teachers, among other things. To prepare better teachers (and counselors, special educators, and administrators), universities must have access to schools using the best practices. To have the best practices, schools need access to new ideas and knowledge. This means that universities have a stake in school improvement just as schools have a stake in the education of teachers (1985, p. 6).

A PDS would be characterized by reciprocity (the mutual exchange between research and practice), experimentation and inquiry (a willingness to study and try new forms of practice), and diversity (a commitment to develop teaching strategies for children with differing backgrounds, abilities, and learning styles) (The Holmes Group, 1987).

Virtually every researcher (Watson and Fullan, 1992; Brookhart and Loadman, 1989; Sirotnik and Goodlad, 1988; and Goodman, 1988) who has written about school-university partnerships has pointed out that schools and universities are different worlds, and that the cultural and operational differences between them mean that collaboration is fraught with miscommunication, misunderstanding, and other difficulties. Hargreaves (1989) captured the differences when he referred to schools as the "world of commitment" (p. 16) and universities as the "world of questioning" (p. 16).

While the importance of university and school collaboration is recognized, and has in fact been prescribed in every major article of reform during the past decade, only those who reside in both worlds and have tried to collaborate have experienced the difficulty of such an endeavor. The reality of the frustrations involved in combining the two very different worlds is aptly described as follows:

Public schools are held captive by legislative and board directives and are almost daily asked to expand their roles to meet such emergencies as substance abuse, racism, fragmented families, and sexually-transmitted diseases,- to name but a few. On the other hand universities are insulated so well from the vicissitudes of governmental decision makers that they are often held captive by a form of lethargic scholasticism. Those differences become painfully obvious when attempts are made to create partnerships between universities and public schools (Erway and Lumley, 1989, p. 10).

Although the establishment of professional development schools is probably one of the most popular topics in teacher education, there is not much consensus about what such schools or projects should be like beyond a focus on teacher education. However, university faculty appointments for school-based teacher-educators, greater teacher involvement in the planning, implementation, and evaluation of the practicum, intensive training of school staff in supervision and a general shift in the responsibility for practicum supervision from the colleges to the schools are most often associated with the initiative (Zeichner, 1990). In some instances, professional development schools extend beyond the practicum and include experiments in school restructuring and pedagogy.

In some of these schools for example, plans are taking shape to conduct ongoing inquiry on teaching and learning, to actively experiment with new organizational and instructional practices, to promote teachers' professional involvement in schoolwide decision-making on matters of curriculum,

scheduling, resource allocation, student assessment, instructional methods, staff development, community outreach and involvement, and school goal-setting and involvement (The Holmes Group, 1989, p. 12).

Among the challenges faced by those creating PDSs is the acquisition and distribution of resources, the development of new approaches and understandings between schools and colleges and their administrations, and the necessary change in the implementation of field placements (Zimpher, 1990). On the university side, many professors view direct personal involvement in the myriad problems of schooling as endless. They feel ill-equipped. Just as schools of engineering, for example, have fewer and fewer professors who have engineered anything, schools of education - especially those in research universities - have fewer and fewer professors who have taught children (Judge, 1982). As Judge (1982) explains, "studying teachers is a highly appropriate activity for faculty, but preparing teachers is not" (p. 32).

Working in isolation from each other, both schools and universities tend to accept uncritically their own views of education. The hope is that by working together, universities may become more focused on outcomes and accountability, while schools and school systems may become more reflective and coherent in their instructional approaches (Watson and Fullan, 1992). In successful school-university partnerships, the agenda must be "specific enough to bind participants in a common enterprise, but general enough to allow for individuality and creativity" (Sirotnik and Goodlad, 1988:219). An important caveat to any discussion of school-university collaboration and the desirable reconstruction of teacher education is the need for

reconstruction of our nation's schools; the two are unconditionally intertwined (Sizer, 1987). Experimenting with new roles and responsibilities for teacher leaders can serve to spur educators' imaginations and encourage the exploration of new possibilities.

TENSIONS IN TEACHER EDUCATION

In spite of the multitude of recommendations published over the past 50 years, teacher education has been fairly resistant to substantive change (Keith, 1987). The prevailing model for teacher education in this country has remained relatively constant. The typical four-year baccalaureate program includes two years devoted primarily to general education and two years split between coursework in the field, coursework taught in the university and pedagogy. Such a model has prevailed for more years than has any other in the evolution of teacher education and longer than the models found in virtually all other fields of professional preparation (Scannell, 1986).

Attempts to identify lessons that have been learned from specific teacher education reform efforts, and from efforts in other professions, are scarce (Sykes, 1984; Coley and Thorpe, 1986; Johnson, 1987; Zeichner, 1988; and Herbst, 1989). Repeated attempts at reforming teacher education have often resembled the implementation of innovation in schools. Reform efforts most often have originated from outside forces and have focused on altering the surface characteristics of programs (e.g. creating early field experiences, increasing the number of clock hours

in student teaching, establishing field experience seminars) without seriously addressing the underlying values, institutional arrangements, and faculty roles and relationships that create the practices which were the catalyst for recommending changes in the first place (Goodman, 1988). Substantive reform will require basic changes of organizational roles, responsibilities and relationships among teacher educators.

The following categories illuminate some of the deterrents and tensions that have blocked the basic changes to teacher education discussed in this section. An overview of how clinical appointments have been utilized in teacher education programs will be provided.

Status

Because of the tremendous responsibilities held by elementary and secondary school teachers, one would expect that the individuals who prepare them would command esteem. On the contrary, both teacher education and its clinical faculty hold little prestige within or outside of the education community (Howey, 1977).

During the first half of the 20th century, classroom teacher involvement in university teacher education appears to have declined. Factors influencing the decline included the increasing specialization of educational tasks and roles and the discontinuation of many laboratory schools. An additional factor was the desire of education schools to achieve status within their universities by adopting the arts and sciences model and distancing themselves from the schools and school people they

served (Judge, 1982; Clifford and Guthrie, 1988). Relatively few colleges of education that prepare teachers are involved in significant research related to the process of becoming a teacher or learning to teach (Guba and Clark, 1978; Howey, Yarger and Joyce, 1978; Joyce and Clift, 1984). In American Graduate Schools of Education: A View from Abroad (1982), Judge points out that there are strong desires among education faculty members to "distance themselves from the world of teacher education in an effort to enhance their own professional status" (p.28).

Many also point to the low status and lack of funding associated with a profession that serves women and children (Lanier and Little, 1986; Lanier, 1982). It can be argued that professional schools and colleges build up respect and status by serving powerful groups of people in society (Lanier and Little, 1986). Given such a situation, one might view the future of colleges of education as bleak when having to compete with the likes of business, law and engineering (Judge, 1982).

Programmatic Coherence

Higher education has been dealt a great deal of criticism of late. One of the many reasons according to Finn (1990) is the "shabby, incoherent curriculum" (p. 5) that characterizes much of contemporary higher education. Goodlad's (1991) study of the education of educators reinforces such a belief because he found that teacher education commonly lacks programmatic coherence; a situation exacerbated by "the disjuncture between the education and arts and sciences faculty and the separation

between those two university groups and the 'cooperating' teachers in the schools where the students are trained" (1991, p. 312).

Rarely have experienced school practitioners (whether teachers, counselors, or administrators) been directly involved in the design and development of preservice programs. Joint curriculum development and even joint instruction between professor and teacher for the preservice teacher is virtually non-existent. Representation from the schools is token at best on campuswide committees; committees that have been studied and have been shown to be ineffective even in selecting and monitoring the progress of students, much less in designing coherent curricula (Goodlad, 1991; Bents and Howey, 1979).

It has been suggested that part of the problem is that the power of the individual faculty member is going up while the power of the collective faculty is going down (Kerr, 1991). Why? The individual as researcher, as scholar, and as consultant relates increasingly to the grant-giving agencies and foundations rather than as a collegial faculty member, let alone a collaborator with public school personnel. And yet today, more than at any time in recent memory, researchers feel the need to move beyond traditional disciplinary boundaries, communicate with colleagues in public education, and discover patterns that connect (Boyer, 1990).

Progress has been made in the direction of seeking out coherent teacher education programs and the crucial components they must possess. Zimpher and Howey (1989) identified attributes of coherent preservice programs. They found such programs to be driven by "clear conceptions of schooling and teaching" (p.247).

They found evidence that coherent programs are also rigorous and academically challenging, they often have thematic undercurrents running throughout the curriculum, strong student cohort groups, interdisciplinary and integrative approaches to the curriculum, direct linkages between research and instruction, and a systematic program of evaluation (Zimpher and Howey, 1989, p. 247-253). One would do well to use the attributes of coherent programs cited by Howey and Zimpher as a yardstick by which to measure progress in the multitude of teacher education redesign projects being implemented throughout the country.

Programmatic coherence is a topic being addressed by the third monograph of the Holmes Group, still in the development stage. The draft proposal calls for an integrated approach to a core curriculum for educators. Teachers, administrators, school counselors and other specialists should encounter a common set of learnings and experiences during their professional education. The draft also proposes that the professional studies curriculum be organized around the following: subject matter knowledge, learners and learning, teachers and teaching, schools and schooling and communities and community-building (The Holmes Group, 1991).

The initiation of new fifth and five-year teacher education programs, alternative routes to certification, and changes in state certification requirements have led to substantial program redesign. Universities may be looking to classroom teachers not only for the input of the practitioner, but also for a more general outsider perspective on program development (Cornbleth and Ellison, 1992).

Supervision of Field Experiences

The call to alter significantly the purpose of field experiences in teacher education programs continues to intensify (e.g. Beyer, 1984; Erdman, 1983; Goodman, 1986; Lanier, 1982; Zeichner, 1981; Zeichner and Liston, 1987). Reformers argue that field experiences should be developed to promote reflection, experimentation, and responsible decision-making (Goodman, 1987).

More recently, Goodlad has characterized the placement of student teachers in schools as haphazard--based more on convenience than on design (1990, p.12). He also has identified "serious disjunctures...between the campus-based portion and the school-based portion" of teacher education programs (Goodlad, 1990, p. 701).

There is no question that the supervision of student interns has long been a vexing dilemma for teacher educators and the interns. Many have questioned the effectiveness of the university supervisor and have recommended eliminating the position (Bowman, 1979; Spillane and Levenson, 1976; Patty, 1973; Haberman, 1971). Expectations frequently clash with reality as university supervisors, cooperating teachers, and interns attempting to carry out their roles. For example, in a recent investigation university and school-based supervisors rarely agreed upon or even articulated the policies and practices that were to guide student teaching (Griffin, Barnes, Hughes, O'Neil, Defino, Edwards and Jukill, 1983).

Often times the university supervisor, caught between the demands of the college and the student teachers, cannot spend the time necessary to build trust. Rare appearances in the classroom do not lend themselves to the type of trust-building and

reciprocity necessary for a collaborative, reflective feedback session (Richardson-Koehler, V., 1988).

University supervisors also tend to become the "odd person out" as the influence of the cooperating teacher takes hold and surpasses that of the university supervisor (Eman, 1983; Zeichner, 1980). This lack of unity can become a divisive wedge between the members of the student teaching triad (student, cooperating teacher and university supervisor) and thus interfere with the development of the student teacher's skills.

Student teachers almost exclusively model the teaching of the cooperating teacher, so criticism by the university supervisor implies criticism of the teacher (Zimpher, DeVoss and Nott, 1980). Both student teachers and cooperating teachers believe that the classroom experiences ("the real ones") are far more effective than what was covered in a methods course. However, findings also suggest that if the university supervisor were not directly involved in the student teaching experience, there would be no direction set for requirements, evaluation, or assessment of the student teacher's experience in the school site (Zimpher, DeVoss and Nott, 1980). Informational communication among participants appears to be enhanced because of the presence of the university supervisor.

According to Schlecty and Whitford (1986), if teacher educators are to serve as effective models for classroom teachers, they must find ways to demonstrate their competence under classroom conditions that are recognizable and understood by the teachers. This can be accomplished only if teacher educators are placed in a position

where a part of their regular assignment includes responsibility for the daily instruction of students in an existing school system.

As it stands now, graduate students and junior faculty are often assigned the responsibility of supervising preservice teachers. Standards used to select cooperating teachers are usually minimal, and these individuals only receive token payment for their work. In addition, few institutions offer comprehensive staff development to cooperating teachers or supervisors (Goodman, 1988).

Meade (1991) also points out that the supervision of student teachers is a role not well-suited to the career ladder for college faculty members. Supervising clinical training does not advance one's academic discipline. Thus it is not an easy path to publishing the types of materials valued in academe. Added to this dilemma is the fact that college supervisors are frequently responsible for so many student teachers that it is impossible for them to observe or critique their charges in any depth. Meade (1991) suggests that college faculty members serve as professional peers to selected classroom teachers who function as clinical supervisors. This is but one possible alternative to a long-standing tension in teacher education, and one that surfaced in varying degrees during the course of this study.

Culture

Talented teachers-in-training notice the stark gap between the world of the schools and the world which teacher education faculties feel is important (Sizer, 1987). Goodman (1988) examined the cultural factors within universities that

frustrate efforts to alter substantively the purpose of teacher education field experiences. Four major cultural characteristics that impact on teacher education programs are lack of resources, low status, fragmented curriculum (professors are known to value their independence and often become immersed in relatively narrow areas of interests; there are few rewards within universities to spend large amounts of time developing integrated educational programs), and the professional perspectives of teacher educators. More than any other cultural characteristic, the perspective of individuals who work in a given program determines its substance. Goodman (1988) suggests that "teacher educators who want to push for reform should identify those values, traditions, relationships, and organizational arrangements in their own institutions that will need to be challenged as part of their implementation agenda" (p. 50).

On the other hand, Brookhart and Loadman (1989) suggest that the cultures of universities and school systems differ on four key dimensions: (1) work tempo and the nature of professional time, (2) professional focus, from theoretical to practical, (3) chosen reward structure, and (4) sense of personal power and efficacy. So while Goodman has identified cultural characteristics that impact on the overall coherence of teacher education programs, Brookhart and Loadman have targeted cultural characteristics that inhibit or enhance the actual implementation of teacher education reforms.

Ryan (1979) has emphasized that in institutional cultures where everybody controls a "piece of the action," it is difficult to establish the kind of leadership

necessary to initiate substantive, coordinated change. However, leadership in higher education is essential so that the university culture is not allowed to assimilate reform proposals in a way that reinforces traditional practices (Goodman, 1988).

CLINICAL FACULTY

Historically, the clinical faculty role consisted primarily, if not solely, of supervising student teachers. Today, the term clinical faculty is being interpreted more broadly to encompass bringing the experience of the school setting into the university as well as working for the university at school sites (Combleth and Ellison, 1992).

Conant (1963) coined the term clinical professor to describe a special type of college or university-level teacher educator, a professorial position with qualification in subject matter and pedagogy. He was concerned with establishing a link between college campus instruction and teaching practice in elementary and secondary schools. The clinical professor was to be that link.

Successful field-based teacher education programs, at the pre-service, induction or in-service level, blend the best of theory and practice, but such a task cannot be carried out by either a university or school system alone: both need to be involved (Watson and Fullan, 1992). Better educational inquiry and better professional teacher preparation should involve both university and school educators, since research and professional practice bear directly on what goes on in both kinds of institutions (Brookhart and Loadman, 1989). Research has shown that teachers value

opportunities to contribute to the profession by assisting with the preparation of preservice students and want recognition from the university for those contributions. Elementary education teachers as a group selected adjunct faculty status as frequently as the professional development and monetary categories in ranking their five top choices of awards as cooperating teachers (Korinek, 1989).

According to Nutter (1986), when field experiences are included in the teacher education curricula, there are three options: skimp on supervision, overburden professors with supervisory duties, or farm out supervision to graduate students and other subprofessionals. The main goal of the clinical approach is to help prospective teachers bridge the gap between the pedagogical knowledge base (be it theory, research, logic, or conventional wisdom) and practice.

Among the proposed responses, if not solutions, to the variously identified problems of teacher education is the re-creation of clinical faculty positions (Cornbleth and Ellison, 1992). Two of Goodlad's (1990) 19 postulates for improving education directly pertain to clinical faculty. The first states that:

there must exist a clearly identifiable group of academic and clinical faculty members for whom teacher education is the priority (p. 91),

and the second, that:

the responsible group of clinical faculty must have a comprehensive understanding of the aims of education and the role of schools in our society and be fully committed to selecting and preparing teachers to assume the full range of educational responsibilities required (p. 91).

Goodlad (1990) goes on to list four broad expectations for the teachers: they should know the constitutional basis of public education, be well and liberally

educated, know how to teach, and be able to participate in educational decision making (p. 92).

Clinical faculty have been described as outstanding, experienced, elementary and secondary school teachers who work with college and university teacher education programs, full or part-time, in the preparation of teachers. Their titles and specific activities vary widely. Some, for example, are cooperating teachers who have been renamed. Others teach or co-teach university teacher education courses and/or supervise preservice teachers' field experiences. Still others are actively involved in redesigning teacher education programs and/or research (Cornbleth and Ellison, 1992).

The reports of programs reviewed by Cornbleth and Ellison (1992) reveal three major forms of clinical faculty roles and relationships:

1. enhancement of the status of the traditional role of the cooperating teacher through title changes, increased preparation and perks, and role differentiation;
2. classroom teacher involvement in teaching university courses; and
3. broad classroom teacher participation in teacher education program planning, admissions, and other decision-making (p. 7).

In some instances universities have simply changed the title and responsibilities of cooperating teachers; such as Teacher in Residence, Visiting Instructor, or Faculty Associate. However, the emphasis appears to be toward increasing the status and involvement of cooperating teachers in teacher education. Once prepared with increased supervisory skills, the cooperating teacher becomes, for example, a clinical supervisor (University of New Mexico) or classroom teacher

educator (Cleveland State University) who assumes full responsibility for the mentoring and evaluation of preservice teachers during student teaching and receives some additional remuneration (Cornbleth and Ellsworth, 1992). Going one step further, Cornbleth and Ellsworth (1992) have identified some clinical faculty programs have enhanced the cooperating teacher role through career ladder type schemes (Lynchburg College, Radford University, University of New Mexico) where programs seek to identify the "best" cooperating teachers and assign them to work with small groups of other cooperating teachers and their student teachers. Nonetheless, enhancement efforts have typically embodied limited role change for participants.

Still other programs have expanded the role of the classroom teacher to include the teaching or co-teaching of university courses for preservice teachers, most often methods courses. Fellows, teachers in residence, visiting instructors, resident faculty, clinical supervisors, clinical professors, master teachers, faculty associates, clinical instructors, or clinical faculty are just a few of the titles given to such personnel and all have various degrees of responsibility (Cornbleth and Ellsworth, 1992).

The implicit and explicit role changes contained in clinical faculty as university instructors go beyond enhanced status. The role, while still essentially a teaching role, now includes collegueship with university faculty members and is undertaken in a new setting. The various responsibilities of clinical faculty in some programs add up to a complex new role. That is, clinical faculty are in some cases

expected to become a link between the school and the university, to represent university perspectives and interests in their schools.

In a few cases, clinical faculty have been invited to play more extensive roles in the teacher education program (Cornbleth and Ellsworth, 1992). For example, some work on admissions boards (University at Buffalo, University of Tennessee), serve on faculty committees (University of Alabama), act as student advisors (University of Alabama), conduct or become involved with research projects (University of Colorado, University at Buffalo, Cleveland State University), or become involved in ongoing program evaluation and input into the improvement of courses (University of Pittsburgh, University of Tennessee) (Cornbleth and Ellsworth, 1992). The clinical faculty who were selected entered roles in programs which were substantially structured before the teachers ever began.

The literature of the past 30 years reflects the ambivalence of university personnel who recognize the desirability of classroom teacher involvement in teacher education beyond the conventional cooperating teacher role, but who have misgivings about the adequacy of teachers' academic and professional education--for which they, ironically, are at least partially responsible (Cornbleth and Ellsworth, 1992). The term clinical faculty is being interpreted more broadly today to encompass bringing the experiences of the school setting into the university as well as working for the university at school sites (Cornbleth and Ellsworth, 1992). Historically, and with few exceptions, the clinical faculty role consisted primarily if not solely of supervising student teachers. In Cornbleth and Ellsworth's review, they noted that clinical faculty

were frequently described as helping, assisting, and playing a secondary role in courses of a more theoretical nature. Subservience to "the university," including its faculty and norms is implicit if not explicit in most accounts of clinical faculty programs. This language clearly communicates an assumption of the superiority of university-generated knowledge.

Another way in which the university, intentionally or otherwise, dominates "partnerships" involving clinical faculty is by establishing relationships with individual teachers to serve as clinical faculty rather than with the schools or districts from which clinical faculty are to be selected. Entering into roles and relationships created by others, as individuals from a lower status organization and without benefit of that organization's support, clinical faculty are at a structural disadvantage vis a vis university faculty in most teacher education programs.

TEACHER LEADERSHIP

Among the goals of Tomorrow's Teachers (1986) is the need "to recognize differences in teachers' knowledge, skill, and commitment, in their education, certification, and work" and "to make schools better places for teachers to work, and to learn" (p. 4). Inherent in those goals is teacher leadership. It should be developed, encouraged and recognized.

In recent years there have been numerous projects that have clearly demonstrated that some teachers can engage in meaningful research while carrying on regular classroom instruction (Nixon, 1981; Biles, 1983; Hovda and Kyle, 1983;

Tikunoff and Mergendoller, 1983). Furthermore, there is substantial evidence that by engaging in research, teachers not only contribute new knowledge about teaching, but they also are more likely to systematically improve their own practice (Schlechty and Whitford, 1986). Unfortunately, without fundamental restructuring of the job of teaching and without fundamental redesign of the rewards and status systems of schools, such efforts are not likely to be systematically pursued by many teachers as a normal activity (Whitford, 1984).

Goodlad (1991) points to other needs that are looming... for leaders who are comfortable in both the K-12 system and in higher education; leaders who can provide the vision and the know-how for preparing a new breed of teachers; leaders who can move the essential actors from dialogue to action. Without such leadership, courageous, well-meaning deans seeking renewal will come up (or go down) empty. Vinegar is used in partnership with oil to enhance flavor; oil enhances the vinegar's ability to touch all that it flavors. Neither is any good without a whisk that brings the two together. We are sorely in need of some "educational whisks" if collaboration between schools and universities is to move beyond concept and into the world of reality.

Talented people want to be trusted with important things. The talented teachers need not only to be identified, labeled, and paid properly, but they also need to gain authority over their work. As Donna Kerr (1983) summarized:

For those bright and able persons who, against the social and economic grain, would choose to teach, we have failed to structure the work of teaching in a minimally acceptable way. With undifferentiated staffing and unchanging

tasks, even the most patient of our teachers could hardly be expected to endure, to teach for a career. We can reasonably expect only the numb and the dull to linger in teaching careers. That some exceptionally able teachers appear and remain in the classroom reflects the heroic commitment and extraordinary sacrifice of those rare individuals and not the wisdom of our institutional arrangements and expressed values (p. 531; see also, Boyer, 1983).

There are always implementation problems when new roles are introduced into an existing organizations and structures. With respect to teachers who have been promoted to the top of career ladders, the challenge is finding something for them to do that will distinguish them from their colleagues in such a way their positions are respected, internally and externally. Whatever it is they do should be important, needed, and valued; require a high level of expertise; and have visibility beyond the classroom context. In order to avoid "turf" problems, whatever it is should be something that is not already a part of someone else's job description. Finally, the new role should not be so demanding and time consuming that it interferes with the teacher's primary identity with and responsibility for classroom teaching (Mertens and Yargar, 1988).

Lee's study (1991) on characteristics of a good leader pointed out that personal leadership attributes must not only be developed, but a strong understanding of how the system works must also be fostered. Lortie (1986) had earlier called for something to be done to raise teachers' "authority ceiling" (p. 572); a concept whereby teachers would have greater autonomy, ownership and decision-making opportunities relative to the entire school building rather than just their classroom. Others have pointed to the special group process skills required of individuals in

forming collaborative groups (Barth, 1991). Such activities require the ability to run effective meetings, build consensus within the team and within the school, in secure and utilize resources, and develop action plans and evaluate outcomes (Barth, 1991).

Leadership has been described as "a process in which an individual takes initiative to assist a group to move toward goals that are acceptable, to maintain the group, and to dispose of the needs of the group" (Boles and Davenport, 1975, p. 117). Common to the definitions of leadership are the following: (a) a focus on organizational outcomes (task); (b) an emphasis on group ownership of organizational outcomes; (c) the provision of affective support (consideration) for group members; and (d) the presence of structure and procedures to influence group movement toward the established outcomes (Rogus, 1988). Leaders develop a sense of shared meaning which can serve to facilitate coordinated action. They generate enthusiasm and commitment.

Advocates for teacher leadership believe that what is fundamentally needed are highly competent leaders who reside where the problems are--in schools--and who can address those problems in a continual and collaborative manner (Howey, 1988). Identified teacher leaders would teach part time and then assume other responsibilities which would enable teaching and student learning. Such teachers need knowledge and skill which extends beyond their own teaching. New role relationships and responsibilities for teachers could be worked out. Little attention has been given to reconceptualizing teacher roles in order to reflect more reasonable spans of responsibility and collaborative relationships in preservice programs (Howey, 1988).

As was described in the section on current reform movements, close affiliations with local and major metropolitan school districts are critical to the development of post-baccalaureate programs in large research-producing institutions. Therefore, collaborative development of Holmes Group post-baccalaureate programs and the notion of career leadership roles suggests that collaborative arrangements are not only possible but desirable (Zimpher, 1988). Teacher leadership must be an outgrowth of expert practice and knowledge. To carry out their leadership role successfully, lead teachers need particularized knowledge on how and what should be the focus of their assistance. A program of professional development cannot be concluded in brief or incidental workshops, but must carry with it a sizeable number of contact hours and sustained involvement over time, perhaps a number of months or a year, and not uncommonly to the extent of an advanced degree. As well, development of teacher leaders assumes significant local district and university support in the designation of role, responsibility, and preparation (Zimpher, 1988).

Teacher leaders need to understand and be engaged in the design and development of initial certification programs so that they have a better understanding of the backgrounds entry year teachers bring to their initial years of teaching (Zimpher, 1988). Concurrently, teacher leaders should be involved in the continuing development of teachers as professionals, particularly with regard to organized inservice and staff development programs at the school level (Zimpher, 1988). Preservice education should not be the exclusive purview of universities, with subsequent responsibility for induction and inservice resting with school districts.

Instead, a more integrated and collaborative view of professional development needs to be fostered in the minds of teachers preparing for leadership roles (Zimpher, 1988).

SUMMARY

A review of the literature has provided an overview of the historical tensions in teacher education, past and contemporary reform agendas, the various uses of what can best be termed "clinical faculty", and teacher leadership. The literature provides a firm foundation upon which to focus the study of clinical educator roles and provides a conceptual framework upon which to base the research questions. What will be the roles and responsibilities of pilot clinical educators? How might the culture and conditions of service in those roles be described? Will the tensions and barriers experienced in those emerging roles resemble those identified historically between cooperating teachers and university supervisors? What impact, if any, will leadership experiences of teachers have on their ability to assume these newly emerging roles?

CHAPTER III
RESEARCH METHODOLOGY
INTRODUCTION

The purpose of the study was to record and describe the experiences of four K-12 classroom teachers serving as clinical educators in a large comprehensive research institution in the Midwest, and to examine the relationships encountered in their new roles. In addition to serving 50% of their professional time as a clinical educator, the individuals selected for the study served the remaining 50% of their time in their respective classrooms. To understand the process by which the clinical educators developed their rôles, a methodology was required that permitted the construction of knowledge in an atmosphere "within which people can respond in a way that represents accurately and thoroughly their points of view about the world" (Patton, 1990, p. 24). The research design and methodology were selected to facilitate this understanding.

The philosophical assumptions for the research methodology and the particular inquiry methods used to guide the study are supplied in this chapter. The first section will provide a general description of the interpretive paradigm. The research methods and the analysis process are detailed in the second section. A description of the

setting and population, an explanation of data collection and analysis, and a detailed rendering of the role of the research and how trustworthiness was established are all provided.

The last section of the chapter concludes with a discussion of ethics and perceived limits of the study.

ASSUMPTIONS

Two key assumptions underlie this study...one is that meaning or understanding is necessarily contextualized (e.g., Mishler, 1979). Clinical faculty as a phenomenon cannot be understood or interpreted adequately outside of the context of time and place--or what Mills (1959) characterizes as the intersection of history, social structure, and biography. In this regard, one's own biography and social location also ought to be recognized as shaping the meanings constructed (Cornbleth and Ellison, 1992).

A second assumption is that to focus only on the present or on the individual, or individuals, in isolation from other factors is misleading at best. Knowing something of the history of teacher education, or of clinical faculty or programs which include some form of clinical faculty component reveals several reasons for the creation of clinical faculty programs and the role and relationship they embody.

RESEARCH DESIGN

The dynamics involved in learning how individuals adapt to new environments and professional responsibilities are complex. Such an exploration lends itself to a naturalistic method of inquiry and the utilization of a case study method.

According to Merriam (1990), a qualitative case study method is often used in education in order to approach a problem of practice from a holistic perspective. A case study design is used to gain an in-depth understanding of the situation and its meaning for those involved. The interest is in process rather than outcomes, in context rather than in specific variables, in discovery rather than confirmation (p.7). "A qualitative case study is an intensive, holistic description and analysis of a bounded phenomenon such as a program, an institution, a person, a process, or a social unit" (p. 8).

Stake (1988) uses the term "bounded system" (p.255) when defining a case study. According to Stake (1988), a case study involves a conception of the unity or totality of a system with outlines or boundaries. The bounded system can be a "person, classroom, institution; usually in natural conditions...the case is something deemed worthy of close watch. It is a complex, dynamic system. We want to understand its complexity" (p. 255).

Descriptive case studies are usually inductive in nature. It is impossible to identify all the important variables ahead of time. Results are presented qualitatively, using words and pictures rather than numbers. Four characteristics are essential properties of a qualitative case study: particularistic (situation, event program or

phenomenon), descriptive (end product is a rich, "thick" description of the phenomenon under study), heuristic (the case studies illuminate the reader's understanding of the phenomenon under study) and inductive (rely on inductive reasoning-generalizations, concepts, or hypotheses emerge from an examination of data....data grounded in the context itself) (Merriam, 1988, p.12).

Overall, the purpose of a qualitative approach to research is to understand the meaning of an experience, to strive to understand how all the parts work together to form a whole. Patton writes:

It is an effort to understand situations in their uniqueness as part of a particular context and the interactions there. This understanding is an end in itself, so that it is not attempting to predict what may happen in the future necessarily, but to understand the nature of that setting-what it means for participants to be in that setting, what their lives are like, what's going on for them, what their meanings are, what the world looks like in that particular setting-and in the analysis to be able to communicate that faithfully to others who are interested in that setting. ...The analysis strives for depth of understanding (Patton, 1985, p. 1).

This study also reflects attention to two characteristics of ethnographic methodology: the researcher's attention to individuals and groups in their lived situations, and the development of commonsense understandings which is how people share meaning and make sense of their daily lives (See, for example, Bogden & Biklen, 1982; Geertz, 1973; Lincoln & Guba, 1985; Van Maanen, 1988). Although the study was an interpretive one, not an ethnography, an ethnographic understanding of culture and setting informed the research (Hohenbrink, 1992). An innovative program has been the focus of the study, thereby requiring the work of the researcher

to be descriptive in nature. The study also contains rich descriptions that lead to interpretations of the data and further research questions.

Lincoln and Guba (1985) state that a case study is the form that is most responsive to the naturalistic paradigm because the report provides the "thick description" that is necessary for transferability. Through the narratives of the case study, the researcher is able to describe the multiple realities of the respondents and to include the interactions between the investigator and the respondents. The case report has the potential to transport the readers to the world of the respondents, to have the readers view reality as experienced by the respondents, and to have the readers achieve a sense of *deja vu* if they were to enter the research site.

Data reported in the format of a case study has been criticized by those who conduct research with the goal of determining generalities. Lincoln and Guba (1985) propose that "the degree of transferability is a direct function of the similarity between two contexts" (p.124). If there is sufficient congruence between the two contexts, then working hypotheses emanating from the research context may be applicable to the receiving context. The degree of transferability depends on the degree of fit between the two sites.

Using the Piagetian schema theory of assimilation, accommodation integration and differentiation, Donmoyer (1988) offers another perspective on the issue of generalizability and the single case study. Individuals come to make sense of the world by incorporating new experiences without modifying their cognitive structures. New experiences are viewed in relations to old ones. But as individuals learn to

adapt to the demands of new information, they modify or accommodate those cognitive structures.

Donmoyer (1988) proposes that authors of case studies can provide vicarious experiences for the readers which can literally transport readers to places that they could not nor would not ordinarily experience. The readers can see things in a different way as they experience reality through the eyes of the researcher. Instead of searching for the one correct interpretation, Donmoyer suggests that "the purpose of research is simply to expand the range of interpretations available to the research consumer" (p.26). With regards to this case study on clinical educators, it is the intent of this researcher that readers will expand their knowledge of the clinical educator roles through the vicarious experience of reading the case studies.

POPULATION AND SETTING OF THE STUDY

The study took place within the college of education at a major land-grant research institution and four surrounding school districts. The university is a member of the Holmes Group and has been working collaboratively with school districts in the county for the past three years to implement professional development school projects.

As a graduate research associate in the office of the dean of this college of education, I was in a unique position relative to the accessibility of information about and people involved with professional development school projects and the pilot clinical educator roles because the PDS initiative in this particular college was

coordinated out of the dean's office. That accessibility, combined with a personal interest in educational policy and reform, led me to pursue a qualitative case study of four clinical educators.

The four clinical educators involved in the study were selected out of a possible nine. The participants in the study were selected based on the focus of their professional development school project as well as their diversity from one another relative to site location (urban, suburban), gender, years of teaching experience, and subject matter specialty. In addressing the question of sample size Patton stated:

There are no rules for sample size in qualitative inquiry. Sample size depends on what you want to know, the purpose of the inquiry, what's at stake, what will be useful, what will have credibility, and what can be done with available time and resources (1990, p. 184).

The sample of clinical educators used in the study provided participants whose differences from one another, in comparison to the initial group of nine, allowed for a variety of recorded experiences during the implementation year of the clinical educator roles. The four participants agreed to participate in the study only after being assured of their anonymity. The following descriptions attempt to contextualize the study for the reader, without revealing explicit information that would assist in the identification of participants. Pseudonyms for the clinical educators and their respective school sites have been used below.

1. Karen at Watuka Elementary School

Karen is in her ninth year of teaching at the elementary school level and is located in an upper middle class suburban school district. Many of Karen's students have

parents who work in some capacity at the university. She has been actively involved in a professional development school (PDS) project for the past two years; a project that incorporates urban and suburban schools and materialized out of a collaborative project in place one year prior to the implementation of the PDS projects. Karen's bachelor and master's degrees were obtained at the university where the research study was conducted.

2. Carol at Sutter Creek Elementary School

The second clinical educator is located in a professional development school project in a suburban school district with a large population of students from working middle class homes. The PDS is one that focuses on a particular teaching/school building philosophy but extends to three other schools in the county practicing the same philosophy. Two of those districts are suburban and one is urban. Carol has taught at the elementary level for 18 years, 17 of which have been in the current school district. Both of Carol's degrees were obtained at the local university. She has held a variety of leadership positions with the teachers' union in her district, and has given serious consideration to enrolling in a doctoral program.

3. JoAnn at Lincoln Elementary School

JoAnn is a veteran teacher of 26 years, 22 of which have been at Lincoln elementary school. She has taught the first, second, third and fourth grades during her career, but is currently assigned to first. JoAnn is involved with a PDS project that focuses

on diversity and multicultural education. JoAnn obtained a master's degree in education from the local university.

4. Gary at McArthur High School

Gary is the only clinical educator in the study who teaches at the secondary level and is male. He has 24 years of teaching experience, all of which have been in the same urban school district in either a middle or high school. Gary received his master's in education at the local university and has served in a leadership position in the district relative to the professional development of teachers. Gary's high school is a designated professional development school project in its first year of implementation, but unlike the other clinical educators in the study, his clinical educator role takes him outside of the school and to the university. Gary teaches and participates in a teacher education program on campus.

A meeting was held with each of the individuals, separately, to explain the purpose of the study, to delineate the expectations of participation in the study, and to request permission for their individual involvement. Each clinical educator agreed to participate in a series of monthly interviews, as well as keep a reflective journal of their activities. The interest expressed by the participants during the meetings appeared to be directed not so much at participating in a study, but in having an opportunity to talk with someone on a regular basis about their new roles.

DATA COLLECTION

Data collection took place during a five month period of time. Interviews with the clinical educators began in the Fall of 1992 and ended in March of 1993. Interviews, were conducted twice a month with each of the four participants. In addition to the participant interviews, supplementary data collection was obtained from selected individuals who worked, in some capacity, with the clinical educators during this implementation stage. Those individuals included university faculty, school professionals and students. This information was obtained through interviews. In addition to the information obtained through interviews, written materials such as personal journals, interim reports and PDS publications, were obtained from the clinical educators and included as part of the research data.

Interviews

Patton (1980) states that,

The purpose of interviewing is to find out what is in and on someone's mind. The reason for conducting interviews is not to put things in someone else's mind, but rather to access the perspective of the person being interviewed" (p. 196).

Each participant was interviewed in a location that was mutually agreed upon from week to week. The more common locations were either a conference room on the university campus or an empty classroom in the clinical educator's school building. The length of the interviews varied from as short as 45 minutes to as long as two hours. Each interview most often began with an update of activities, concerns, issues, and successes, which in turn, led to additional follow-up and probing questions. At times the interviews were more semi-structured in that the initial

interviews were used to obtain sociodemographic data from the participants. Interviews often included a specific question or two based upon previous interviews or information gained through the review of literature or information gathered from fellow participants in the study (Appendix A).

Observations

Several visits were made to each site and/or professional development school activity in order to familiarize myself with the context in which each clinical educator was functioning. It was important to me to try and better understand the unique environment and culture of each of the four worlds the participants were experiencing. Site visits and observations helped me to see if, and how, the participants were attempting to bridge their home setting with that of the university. Field notes on both the observations and any informal conversations were taken. The field notes served to inform and often provide a framework for the semistructured interviews. The notes were also analyzed for any patterns or common themes that developed.

ROLE OF THE RESEARCHER

In a qualitative case study, the investigator is the primary instrument for gathering and analyzing data. Consistent with that role, the researcher must possess certain characteristics in order to successfully carry through the research; tolerance for ambiguity, sensitivity, and skill as an effective communicator. The researcher

must be sensitive to the context and all the variables within it including the physical setting, the people, the overt and covert agendas, and the nonverbal behavior (Merriam, 1988, p. 38). To produce a worthwhile case study, the researcher must be sensitive to the biases inherent in this type of research. Because the primary instrument in qualitative case study research is human, all observations and analyses are filtered through one's worldview, one's values, one's perspective. One of the philosophical assumptions underlying this type of research is that reality is not an objective entity; rather, there are multiple interpretations of reality (Merriam, p.39).

DATA ANALYSIS

The study is an example of a single-program case study in which case studies of several participants were conducted. In such an approach, the analysis begins with the individual case studies, then a cross-pattern analysis of the individual cases becomes a major part of the data for the overall study (Patton, 1990).

Patton explains that,

Inductive analysis means that patterns, themes, and categories of analysis come from the data; they emerge out of the data rather than being imposed on them prior to data collection and analysis (1990, p. 390).

Patton (1990) further explains that qualitative synthesis is a way to build theory through induction and interpretation.

The strategy of inductive designs is to allow the important analysis dimensions to emerge from patterns found in the cases under study without presupposing in advance what the important dimensions will be (Patton, 1990, p. 387).

In order to begin an inductive analysis, the first step was to organize the transcriptions, reflective journals and supplementary data according to participant. Transcriptions of the interviews were completed verbatim throughout the six month data collection process. Once the transcriptions were completed, they were placed in a large, three-ringer binder and organized by participant and date of the interview. I then sorted the field notes, which had been written during observations and interviews, and the other supporting documents, such as journals and other written work completed by participants and offered to me for use in the study.

With all of the data collected and sorted according to each participant, I began to read the data, one case at a time, highlighting sections of text that were of particular interest to me. I then read through the material a second time, making notations in the margins, usually in relation to the highlighted portions of the text. This process of summarizing the data was the first step towards the identification of categories.

While reading through the data, certain patterns began to emerge that were similar for each case. Once these patterns were identified, I organized them according to whether or not they fit under the auspices of each of the research questions. If not, those pieces of data were not discarded. They were placed in an "extra" and separate category identified as unintended outcomes. In addition to the biographical information that was provided by participants during the first interview, the categories that arose out of each research question were as follows:

1. **Perceptions of Tasks and Responsibilities**

Within this category, several common themes were extrapolated from the transcripts that described each participant's tasks and responsibilities during implementation of the pilot clinical educator roles. The themes included school-based teacher educator, historian, PDS "linchpin," expert, salesperson, and meeting participant.

2. **Perceptions of Tensions and Barriers**

Common themes which arose in relation to this research question included the use of time, parent concerns, efficacy, future professional directions, and status. In some instances there were tensions such as release time logistics, and urban vs. suburban issues that surfaced in only half of the participants' experiences.

3. **Perceptions of Culture and Conditions of Service**

The greatest similarity among the participants was in relation to this research question. Each clinical educator spoke of sharing a classroom, interpreting the perceptions of peers in their home school setting, working as a clinical educator within or outside of a PDS project umbrella, and functioning within the university setting.

VALIDITY ISSUES

Validity, in qualitative research, "depends on the use to which the findings are put" (Stake, 1988, p. 263). A case study is valid to the reader to whom it gives an

accurate and useful representation of the bounded system. The forms of validity that are applicable in naturalistic research will reflect the purpose of the research, as well as the methods used to generate theory (Patton, 1990).

One of the primary ways of increasing validity is by triangulation. The technique is one of trying to arrive at the same meaning by at least three independent approaches. A finding that has been triangulated with several independent data-holdings is usually more credible than one that has not (Stake, 1988). Three data sources were used in this study; direct interviews with the clinical educators, reflective journals and notes kept by the clinical educators, and one-time interviews with individuals directly associated with the clinical educators in the university or schools. By combining the three sources of information, certain issues and themes can be pursued. Patterns are more easily identified. As Stake puts it, we search for "sweet water" or patterns of meaning (1988, p. 261).

ESTABLISHING TRUSTWORTHINESS

A prolonged engagement with the participants, triangulation of the data, and member checks were methods I used to establish credibility. As someone whose daily work at the university was related to the research study, I was in constant contact with the participants, both on a formal and informal basis. My work role also helped to establish a sense of connectedness to the university on the part of participants. The fact that I held a graduate assistantship in the dean's office seemed to ensure, from their perspective, that what they had to say was not only important,

but crucial in evaluating the new clinical educator roles initiated by the university and school districts.

ETHICS

The ethics of qualitative research were of primary importance as I conducted this study. According to Louis Smith:

Ethics has to do with how one treats those individuals with whom one interacts and is involved and how the relationships formed may depart from some conception of the ideal. At a common sense level, caring, fairness, openness, and truth seem to be the important values undergirding the relationships and the activity of inquiring (1990, p. 260).

These characteristics of caring, fairness, openness, and truth were integral to the design and implementation of my study. Ethical issues of particular concern in this study were:

1. Participants

Every effort was made to keep the identification of participants confidential. Because there were only a total of nine pilot clinical educators and 12 professional development school sites within the research setting, identifying characteristics were altered as much as possible without altering the contextual description that is so important in naturalistic inquiry.

2. Audio taping

There were one or two instances during the interviews when participants asked that the tape recorder be stopped before continuing to share information. I complied with each of these requests. Participants were given their individual profiles so that

they could review them and correct, amend, or delete anything they viewed as a misinterpretation of their story.

SUMMARY

In this chapter I explained the methodology which directed the conceptualization and implementation of the study. The methods that were used to gather, analyze and report the data were also discussed. I explicated for the reader the efforts I exerted to ensure that the results were regarded as trustworthy.

The following chapter presents the results of the study. In chapter IV the primary and supplementary data is presented in the form of descriptive individual participant profiles. The words of the participants are utilized in the profiles which detail the first several months of the emerging clinical educator roles. The chapter also provides an analysis of the patterns and themes which emerged in the study and across participants.

CHAPTER IV
FINDINGS OF THE STUDY AND ANALYSIS
INTRODUCTION

This chapter presents the results of the data collection and has been organized into two sections. First, a descriptive profile of each of the participants is provided. The profiles were designed to capture the four clinical educators' perceptions about their individual experiences. The profiles incorporate many of the participants' actual interview statements. Each of the profiles varies in content and style, but is similar in organization because the outlines emanate from the research questions.

A thematic analysis of the data in relation to the research questions is provided in the second section. The analysis is based on the perceptions highlighted in the profiles. It is in this section that the similarities across the four participants are linked and emerging themes and patterns developed.

Profile #1: A Clinical Educator in a Multiple Building PDS Site: "Karen at Watuka Elementary School"

Karen is a young and energetic elementary school teacher in an upper middleclass suburban community near the university. She received both her bachelors and masters degrees from the university with whom she is now collaborating and is a lifelong resident of the local area. As she pointed out in one of the interviews,

I've been teaching...let's see, this will be my ninth year. I came into teaching because I wanted to be a teacher since third grade.

Karen now teaches third grade and has ever since beginning her career. She student taught in the very same district where she is now employed. Karen is white, in her early 30's, and the first in her family to receive a college degree.

Four years ago, Karen pursued graduate coursework at the university in guidance and counseling, but soon decided that the job prospects in that area were grim. Not wanting the coursework to "go to waste," she decided to put the graduate hours toward a master's degree in elementary education.

My sole reason and motivation was to use those courses so that I could get the degree done in a year. I wasn't really interested in getting involved (laughter), and look at me now. I'm really involved.

The turning point for Karen was becoming part of a research group that formed out of a required research course in the degree program.

I joined the research group which was an integral part of the professional development school project that was forming. We set up model school sites and were going to study how we did collaboration. It wasn't what I thought research was going to be (spending a great deal of time in the library). It was really interesting because we'd have conversations about our practice. People would tell us we weren't so crazy after all.

Through her involvement in the research group, Karen became active in the PDS project; one of seven initial PDS sites formed between local schools and the university.

You know one thing leads to the next and pretty soon you're sucked right in and you didn't even know it! (laughter) So...that's how I got to become so involved, but part of my interest was due to the fact that I was ready to get out of teaching. I mean, I wanted a master's degree so that I would be more marketable.

As information began to disseminate to school districts and teachers regarding pilot clinical educator roles, Karen felt that serving in a pilot clinical educator position would be an interesting and new challenge.

As much as my room has really changed drastically because of my graduate courses and interaction in the PDS, they [fellow teachers in the school] haven't changed. Fortunately I have a core group of people here at school that support me and I have the Thursday nights where our PDS group meets. I love that interaction. I thought the clinical line would be an opportunity to participate in more of that kind of activity.

Karen was selected as the clinical educator for the PDS project in which she had been involved. The PDS project works across six different elementary schools; three urban and two suburban. The focus of the project is collaboration. The following sections, organized around the research questions, provide a composite view of Karen's perceptions of her new role and utilize many of her own words as recorded during the interviews.

PERCEPTIONS OF TASKS AND RESPONSIBILITIES

Each professional development school Project developed a job description for the pilot clinical educator position announcement sent to school districts in the county. Two clinical educators were appointed within Karen's project, each with very different job descriptions. Karen's particular role was described in the posting as "a co-coordinator of the project who will be involved in supervising and facilitating the professional development of other teachers in the PDS, as well as furthering communication among PDS schools within the project" (College document, 1992).

In talking with Karen she reinforced the fact that her clinical line was a combination of supervisor/co-coordinator. The supervisory portion appeared to be the most unclear.

It's unclear to me because we have TA's (graduate students). What is their role if I do the supervision? We're also working towards having teachers be the primary supervisor. What is the cooperating teacher's role if I go in and start doing supervision? There are so many issues yet to be resolved...

These questions were raised by Karen during the first month of the study. Four months later I had the opportunity to participate in a meeting comprised of the university faculty member (Margaret), the TA's and clinical educators associated with this particular project. The focus of the meeting was the issue of role designation among TA's, cooperating teachers and clinical educators. The issue had yet to be resolved and was still an item of discussion upon completion of this study.

Over the course of spending several months with Karen, certain descriptive titles emerged that help to illustrate the kinds of tasks and responsibilities she assumed in her emerging clinical educator role.

Meeting Planner and Participant

Upon being selected as a clinical educator, the first notable difference in Karen's work life involved the number of meetings that seemed to be required.

Tuesday is basically devoted to meetings. We (Karen and the university faculty member) meet to plan Friday's class (seminar for the post-degree students) and then we meet with all the methods people after that. That's pretty much the afternoon.

Thursday evenings are considered to be "PDS night". All of the teachers in the PDS as well as student teachers were encouraged to attend. Karen, together with the university faculty member, planned the sessions and arranged for special guests and activities. One week's class focused on building consensus. Another focused on the role of administrators and how they view PDS projects.

We were trying to work a time that PDS teachers could talk to us, Margaret and me, about what they wanted from a clinical educator. I used to think that I was worried about filling the time, but it seems to just happen. There are a lot of meetings or running here or doing this. Margaret used to run the weekly PDS meetings and now it's the two of us running them. We try to share who starts the meetings and how decisions are made....

Salesperson

Karen often finds herself in the position of "selling" the PDS project to teachers. She explained that in the beginning there were a lot of people griping and

complaining about PDS work; that it required a great deal of extra time and nothing was being accomplished. An additional part of her role as clinical educator has been to alleviate those concerns and convince teachers of the value of participation in the PDS.

When I talk to people I say you know you really have to give it a chance. If you've only come twice, you've really not given yourself enough of an opportunity to know what PDS is all about.

Karen went on to explain:

The PDS has definitely had its ups and downs and teachers need to see that. I think we always struggle at the beginning. It was the beginning of the school year and we struggled again because we had all of these new people and what do you do about catching them up? We talk in a basic jargon. We talk about PD's and CT's and all that stuff and I'm sure it goes in one ear and out the other. It makes no sense to most people. We worked on slowing down and talked about trying to be more explicit about what all of the terms mean and how decisions were made. You learn the hard way. You learn by making a mistake and having people confused. So I see part of my role as sales.

An additional "sales job" has evolved in convincing parents that their children's education has not suffered because Karen is away from the classroom half-time. Karen prepared a packet of information on the PDS project and clinical educator responsibilities, as well as literature on collaboration. She provides the packet to any interested parents. Karen also planned an open house so that parents could come and meet the co-teacher and ask questions about the year ahead. In addition to Karen and the co-teacher being present, the university faculty member involved in the project also participated in the open house.

PDS Site Visitor/Supervisor

Of all the tasks and responsibilities associated with Karen's role, the role of site visitor/supervisor seemed to be the most ambiguous. During the course of several months the way in which she worked with the participating school sites and teachers changed. For the most part, however, two days a week were devoted to visiting schools in the PDS.

I spend some time in the schools, in the six sites, but that's the part I like the least.

When asked why, she responded,

Because I don't know how I fit in. I mean I don't go on Tuesdays because it always seems that there are meetings, other meetings to go to and that's when the students are placed there. So I go on other days, and so I don't know that they know how to treat me. I've been treated anywhere from like I'm a post-degree student and they're explaining to me why they're doing everything, to I'm being ignored in the back of the room - which is okay by me. I don't have a problem with being ignored. But I didn't know why I was there. I'm not really sure about my purpose. I think I'm going in trying to learn about that school but you can't really learn about a school in a few visits.

When asked what the best use of her time would be, ideally, when she visited PDS classrooms, Karen responded that...

Ideally it would be for teachers to be free and we could talk. That would be ideal because then we could talk about issues in the PDS, issues about their students (post-degree students) and their needs, whether they need help with supervision, etc.

As the questioner, then, I was curious that if what she had shared with me was the ideal, what then was the reality of the current situation? What actually had been happening when she visited classrooms?

When I catch people during their planning period we usually talk about the new supervision forms. I probably have a better understanding than any of them because it was our master's group that did the forms. I ask how they're feeling about the forms, if they understand how to use them, etc. Usually there's no real questions about them, but there was one team that I did end up talking to during their planning period. At first it was 'yes, we understand the form' when I was in their classroom, but I said I'd wait ten minutes until they were free to talk during their planning period. There were a lot of misunderstandings when we finally had time to talk. When you're in the middle of teaching 30 kids you can't say well you know I really don't understand this part.

During a later interview with Karen she revealed that her role designation had changed somewhat.

I actually don't spend very much time in the schools. We've redone our method of supervision in the PDS and so since I was a part of that, and I'm also the person that's "free", I said that I would meet with people who were confused about the new process. Inside the PDS the TA's already have relationships with all of the teachers; relationships that I don't have because I only see them on Thursday night. So my relationship with them is still much more superficial.

Tension was created when Karen sent an E-mail message to all teachers asking if a group was interested in discussing how the supervision of student teachers in the PDS would be handled. One of the TA's indicated that what Karen was asking was traditionally an assignment handled by the TA's. Karen's response was that if she was supposed to be a supervisor, with whom should she be working? Karen's rationale for distributing the E-mail memo was that there should be some consistency in organizing all of the teachers across the PDS. TA's would deal with their respective sites, but Karen would be the "glue" that would hold the entire PDS together. And yet, she was also asking herself...What am I making consistent? What needs to be consistent? Does anything need to be consistent?

An additional question regarding Karen's role in the PDS schools was raised when one of the TA's became ill during Winter quarter. Margaret asked Karen if she could fill in during the TA's absence. Karen was hesitant and explained that the request needed more discussion, but she eventually did assume some of the responsibilities of the absent TA. Karen felt she had a reason to be in the schools for the first time since assuming the clinical educator role and found that PDS teachers were more receptive to her presence in their classrooms. Another change that occurred was how the student teachers seemed to perceive Karen.

What's been different since I met you last is the PD (post-degree) students actually use me a lot more now. We're also trying to be careful to use me in a way that is different and valuable to the university and not just an extra person to do the same thing that everybody's doing.

The "Expert"

Consistent with the role of clinical educator comes the perception that with a new title, one suddenly has acquired, or is expected to exhibit, special expertise.

When we were talking over the summer the PDS teachers felt like they needed help with supervision. I don't have any coursework in supervision. My knowledge is out of sheer interest. Maybe I've done a bit more reading than they have, but that doesn't make me an expert. I'm going into their classrooms, not as expert. Who am I to say what they should be doing and shouldn't be doing? I feel as though people expect me to have all of the answers.

The Historian

Karen had a major role in compiling a history of the PDS project. Included in the materials she collected were copies of all proposals generated from the project,

documents prepared by PDS participants, literature on collaboration, agendas and minutes of meetings, and interim reports. Each school has copy of the binder to which additional material will be added. "It's like a notebook of what we've learned about collaboration and the history of how our PDS has evolved."

The "Gopher"

During the course of our conversations, it became apparent that the types of activities Karen felt she should, or should not be doing were a concern.

I would like something to happen but I don't know what kind of priority it is for anybody else. I think I could use my time more productively if I knew what teachers wanted instead of always trying to figure it out. I don't want to be just a gopher for a school. I don't want to be the person just to go to the library and look up everything because they don't have time to do that. I mean quite honestly that's not what I'm interested in....just shuffling paper. I really want to sit down and talk to teachers about how to do supervision. Anybody can go to the library.

Preparation for the Role

Because the focus of the interviews often turned to the tensions and frustrations associated with the new role, Karen was asked if and how preparation for the role could have assisted in easing such tensions.

I don't think you probably could train for this position because everybody does something so differently. The role evolves out of the needs of the group. I think it would be interesting to have a reading group for the clinical educators...like on collaboration or other topics related to what we're trying to do. What we're missing with the clinical educators is that we don't share a cause. I think we are probably all making the same mistakes and having to learn on our own. If we were to share, it might help us be more effective. Maybe we

could use clinical educators as a person to connect some of the PDS's. I don't think we do that very well.

PERCEPTIONS OF TENSIONS AND BARRIERS

Throughout the series of interviews, a number of tensions and barriers were identified by Karen in connection with her newly evolving role. The tensions manifested themselves in several of the following areas.

Parental Concerns

My most difficult experience was talking with the parents of my students about the change in my third grade classroom as a result of my selection as a clinical educator.

Karen was surprised by the concerns voiced by parents and the confirmation they wanted from the university that the change (having two teachers 50% time) would not be detrimental to the students learning.

I remember one parent in particular. He didn't want the information about PDS projects and the clinical educator role coming from a little teacher, he wanted it to come from a person called doctor.

Karen expected the parents to be more open to such a new opportunity, especially since it was affiliated with the university. One parent asked, "Do you feel the PDS stuff will affect students' learning?"

You see, the problem was that the parents wanted to know what I was doing, and I wasn't even sure myself. Basically I told them that my classroom is set up as a result of graduate work I've done through the university, and they all seemed pleased with that. Of course, that was last year though, that influenced this year. I don't know what will happen next year.

Use of Time

The time required for this new role has been a major point of discussion across all of the participants. During the first interview with Karen, she indicated that she had had a meeting every night after school for a period of three to four weeks. What she felt was most adversely affected by the time constraints was planning for class. Her planning was much less detailed than before assuming the clinical educator role. An additional concern that arose out of the time factor was the fact that Karen would be spending less time with her third graders.

I worried about not knowing my kids as well as I usually do. I was relieved to find that when I sat down to do conferences they ran just like they always have.

Karen was not unlike the other three participants in that all were very aware of how they used their time, and the lack thereof in trying to accomplish all the tasks and responsibilities they believed were a part of their new roles.

When I first started I thought gosh I've got to be doing something everyday. I've got to do something, not just read because as teachers we're really not given those luxuries. We're supposed to go home to read or write something.

Karen went on to explain in a later interview,

You need time to be able to figure out what you're going to do. Having worked with another clinical educator who started after I did helped me to realize that. I feel much better knowing that people have to go through a stage of there's lots to do but nothing to do.

Not only does time play a factor in organizing the tasks that clinical educators believe need to be accomplished, but it has also been identified as a deterrent in strengthening relationships in the PDS projects.

I just can't get to the PDS sites often enough to really build a relationship with the six schools and the principal. I don't even see most of the principals ever. That's what I think this clinical educator role takes time--time to talk to people and a lot of people don't have time, or the interest. I don't know how you go about getting more time and more interest.

Release Time Logistics

Each participant experienced a differing degree of difficulty in arranging release time with their respective school districts. In Karen's case the release time seemed to be particularly troublesome. Karen felt responsible for being the broker between the district administration and the beginning teacher selected to be her 50% time replacement. Lack of communication between the appropriate individual in the district's central office, the university contact person, the school principal and the two teachers involved led to frustrations and misconceptions.

Status

The perceptions of others, discussed more fully towards the end of this chapter, were a major tension for Karen. People's perceptions, whether they were teaching peers, school administrators, or university faculty, were directly related to how Karen interpreted her status as a clinical educator.

I don't consider that this position in any way gives me any more power or influence. I don't perceive it that way. A lot of other people do. One of the TA's said 'you know, I think you need to be careful about how much you say and how much you suggest because of your new role.' In some ways that bothers me because I feel like I should just be a teacher and I should be able to say as much as I want to be able to say. It has been suggested that I be less quick to jump in with ideas and suggestions or comments. It seems to

me that if I have something that I think would be valuable that I should be able to share it.

Sense of Efficacy

Karen continually pointed out her concerns during the interviews surrounding whether or not what she was doing was making a difference.

I keep thinking nobody bothers. I feel like I'm not being used in the way that I've learned about. I mean, I don't think that I necessarily have all the answers by any stretch of the imagination, but I also know I have thought about things that other people just haven't taken the time to think about. I keep struggling with how I can take back all that I am learning to my district.

Karen continually struggled with the idea of how she could get her role to enhance her school district. She explained that she had talked to one of the administrators in her district about the possibility of using her clinical educator position to help teachers begin to see teaching the way that the administrator often spoke about in district meetings. She explained that she had incorporated what she'd learned in graduate school to build the type of classroom that the administrator advocated. Karen remarked that, "nobody every asks me why I'm doing some of the things I do in the classroom."

Future Professional Directions

Karen expressed a moderate amount of concern regarding her future professional development and career path.

I'm not interested in doing administrative work. I would really like to have some role created where I could work with teachers utilizing the information

I've learned through my PDS involvement. If I go back into a classroom you become, well, all your time is spent in your classroom and the knowledge you gain in your own classroom doesn't get back out to other teachers. I think that's the problem. From my understanding of reform, what's happening is that that reform is taking place in pockets but you can't get the changes beyond those individual pockets.

Urban vs. Suburban

Karen was a suburban teacher attempting to provide leadership and professional development activities for a large majority of teachers in urban schools. The tension created over that particular situation in the PDS surprised Karen and the faculty member working with the project.

The message comes across in our PDS that it's harder to teach in urban schools. My argument is that it's no harder but it's different. Just the same, I keep thinking that I'm missing out on a lot of opportunities because I'm not an urban teacher and I shouldn't. I don't think I should feel that way. I've been really struggling with that lately. Part of me says that I should apply in the city and teach in an urban school so I can really be credible in PDS and then I think that really, that doesn't sit right with me because good teaching is good teaching. Both urban and suburban schools need good teachers.

PERCEPTIONS OF THE CULTURE AND CONDITIONS OF SERVICE

Karen found herself in a number of different settings throughout the pilot clinical educator experience; each with its own culture and conditions. The variety of relationships and perspectives that the clinical educators consistently encountered and operated within were generally experienced at the school site, district, university, and within the PDS project.

Sharing a Classroom

One condition that immediately became apparent after Karen was selected to serve as a clinical educator was the fact that she would now be sharing her room and her students with another teacher; a teacher who would be embarking on her first year of teaching. When asked if she felt that having a beginning teacher share her classroom was just an added responsibility she replied,

No. That's the part I like the most. I really like helping teachers become teachers. She teaches science and math. That's the area that I like least to teach. I don't have to worry about planning in those areas. The kids are real excited too. I think they like having somebody new everyday. It's that constant movement. You're always on the go with kids and things are different and they sort of snap along real quickly.

Karen went on to explain,

I am her mentor teacher by far. We talk every day about why things work and why they don't work for her. What to do about this student or that student. We keep saying it's really unfortunate that we can't just put two classroom teachers together, a new teacher and somebody more veteran, and let them stay in the same classroom all year and have this kind of experience.

There was only one instance during the course of our interviews when Karen did not speak of her shared classroom experience in a positive light.

I think she still feels as though it's mostly my room. It is an adjustment because I'll get in there and stuff is in my desk not exactly the way I like it. At first I didn't think it would bother me but then it's like all this stuff is in my desk and I can't find the file I want because I know exactly where it is when all this other stuff's not in here. You know you make adjustments for what you have to do.

Peer Perceptions and Home School Setting

I don't honestly know what other teachers in my building think. I want to say that they think this is a real honor, and in a way I do too, but I also think that

in a way anyone could have done this. They basically say congratulations and that's it. They want to know about my schedule...like where will I be, when will I be in a certain location, etc.

Karen, more than any other participant, expressed concern about the role of her principal. Through information shared during the course of the interviews, it was clear that there was little interaction between Karen and her elementary school principal.

If they (principals) don't buy into it, even if they are kind of vague about PDS, kind of wishy washy, not really against it, not really for it, even that presents a problem. You have to have somebody there who's supporting the teachers who's excited about becoming involved in PDS initiatives.

When asked if her principal had ever discussed her new role in a faculty meeting, Karen responded that he had been supportive of her personally, but had never talked about what she was doing with the faculty. Karen explained that with a staff of 40-50 individuals, there were often things going on that nobody else knew about. In a later interview, Karen went on to say,

I don't think I should have to keep saying to the principal, aren't you at all interested in what I do half the day? I mean this district does lose me a half day. Most of the staff still don't know what I do. I mean, they know if I leave school it is somehow associated with the university and PDS work. They may not know I even have a title.

Karen places responsibility for not making strong connections with her school faculty on herself and the school administration.

I just don't think I'm doing a very good job of making connections outside of people that are clinical educators. It's not flowing into our school. My role is not questioned at school. Nobody knows what I do. That partially is an administrative problem. But at the same time I'm also not influencing other people. I mean, I'm also not a part of what goes on with the university faculty outside of Margaret.

Communication in Karen's school building appears to be very limited. Staff meetings appear to be very controlled. Issues are talked about for fifteen minutes and then the group is led to the next agenda item so that the meeting ends ahead of schedule. Problems are infrequently discussed in an open form. Conflicts are rarely brought up in a public manner because they are to be dealt with in writing with the principal.

The sense that I get from my fellow teachers is that I'm considered now to be different and I'm not really one of them anymore. Maybe this is my own interpretation and as I struggle and work with things I sometimes change my mind. I'm not totally one of them any more because I do this other part. So I'm now kind of one of those people over here. I understand there are certain responsibilities that come with that but it seems to me that you shouldn't have to be alienated just because of this role.

In a more open and collegial school setting, the concerns Karen shared may have been much less important and would have consumed less of her time. As it stood, the concerns were consistently present and a very real barrier to productive work and positive change.

The University Connection

Karen's feelings about her connection to the university were articulated in this way,

When I thought about what my role as the clinical educator would be early on, I really thought that I would be more involved in the university. For example, I thought I would be invited to the EMCE [Early and Middle Childhood Education] faculty meetings so I would know other people outside of Margaret.

Karen works directly with one particular faculty member at the university who has provided leadership for the PDS.

Margaret and I have worked together for quite a while and so we've made a conscious effort to break down any hierarchy. We purposely do things so that we don't send a message of hierarchy. It takes time to build relationships with the university, to feel comfortable down there and to just work out the little bugs.

Karen also felt strongly that if major changes were to take place, clinical educators had to have more interaction with faculty other than those involved in PDS projects. Margaret, she explained, had already bought into the PDS initiative. If the purpose was to make new connections, the PDS and clinical educator initiative was failing because connections were only being made with certain individuals.

I don't think we're setting up paths for this interaction to happen - but maybe we've moved too fast to have that happen too. In some ways it has happened--I was invited to attend those meetings for the Dean selection process. Going to the faculty retreat was another way that we created those paths. I think each clinical educator probably has a department in which they could have influence. I think that when faculty make decisions we could easily contribute and possibly point out that the direction in which they're headed would not work too well in schools because... There's just not a lot of conversation outside of the people we work with really closely.

Karen went on to describe how another university faculty member in the same program area as Margaret was really nice to her during the Dean's meeting.

She at least recognized and talked to me. But outside of that, I didn't have much contact with university people. So I wonder how many university people are influenced at all or have any contact with clinical educators? When you think about it there's a lot of university people and not many clinical educators.

Another way in which the university has unintentionally hindered interaction with clinical educators is by the physical location of office space provided to them.

Karen talked about the special meeting area set up for PDS projects and clinical educators.

My office at Ackerman is wonderful, but think about it. The building is away from the university. The location has solved the parking problem, but there is no interaction because no faculty will come out here, or at least I've never seen any. There isn't any integration going on out here and of course nobody from the school district is here. The only possible interaction is with other clinical educators and that doesn't even happen. I don't even know what I want the interaction for but it seems to me that it should be there. It just seems that there must be other things going on in other PDS's that we could learn from and not make the same mistakes or that we could enhance something and make it better.

Finally, Karen also raised the issue of a lack of reciprocity between university faculty and school teachers regarding an exchange of roles.

Even though I'm co-teaching with Margaret it's still her course. She never has the opportunity to be in my classroom where the roles might be reversed and I'd have the opportunity to explore how I would feel about giving up my classroom.

The PDS Connection

Interactions with other teachers from the six schools within the PDS had not been as frequent or as in depth as Karen had hoped. She explained,

I think they think I'm a little nuts because why would you want to get yourself into something that's more work? By becoming involved, though, you have influence and power. I believe anybody can do it. I try not to think that I did this for those things...I did it because I'm genuinely interested.

Karen did not feel as though the selection process was competitive outside of the PDS, but was certain that that would not always be the case. She indicated that anyone in the PDS could have assumed the clinical educator role, but that not enough

people are really involved or have a good understanding of what the project is all about.

People don't give the PDS enough of a chance. You can't convey this message in nine weeks or ten weeks. Chances are you won't like it in ten weeks. I hated it in ten weeks. I have been going to drop from PDS the first year one hundred times, at least. At first I saw nothing being done--nothing as far as products being produced. I thought we were just rehashing the same things. I just wasn't thinking. It took me a long time to move from having a product to being productive. Teachers operate this way. They get stuff done in their classrooms and are much more time oriented. We needed to think about what we had learned and what was valuable.

Karen also expressed frustration that her role should have involved more than just getting teachers involved and attending meetings. She articulated a desire to help teachers actually change their teaching or at least question the way they'd been teaching.

SUMMARY

The use of time and the lack of clarity in regards to working with other teachers were the major concerns expressed by Karen in the interviews. There is a need for the new roles and foreign designations for school and university teachers and for graduate teaching associates to be further explored, discussed and practiced. The lack of real parity with Margaret was still apparent as the study was concluded. Beyond Margaret, there was little, if any, real interaction between Karen and the university beyond the specifics of the PDS project.

Karen's experiences also pointed to the importance of communication with the parents of children enrolled in the classrooms of clinical educators. Initially their

reactions to having their child's teacher released from teaching half-time were quite negative. As Margaret became more involved in the situation and a special meeting was held for parents to ask questions, the parental concerns appeared to subside. The question raised by parents regarding how the new structure of their child's classroom will affect student learning is certainly fair and one that will need to be addressed and evaluated. The positive relationship experienced between Karen and her co-teacher certainly helped to make the situation positive and one that appeared to be beneficial not only to the students, but to Karen and the co-teacher as well.

Finally, the issue of efficacy was also important to Karen. The specifics of what it means to "make a difference" in the clinical educator role eluded Karen, but remained a constant concern. Her statement that the school district was "losing" her for half a day each day suggests that the role needs to be revisited by all stakeholders and jointly defined so that it does not appear that only one party is benefitting from the relationship.

Profile #2: A Clinical Educator in a Single Site PDS Setting: "Carol at Sutter Creek Elementary School"

Carol, like Karen, is an elementary teacher in a suburban school district and is a life-long resident of the state in which the study was conducted. She attended a five-room rural elementary school and was one of the first of her family to pursue a college degree. Carol attended a branch campus for two years before moving to the main university which was located less than 100 miles from her family home. She

has taught for a total of 18 years, 17 in the school district where she is currently employed.

Soon after being hired in her current district, Carol began taking graduate coursework at the same university where she received her bachelor's degree. The majority of those courses were in the fine arts and were taken more for personal gratification than for completion of a second degree. Slowly Carol began to integrate her university coursework into her classroom program; a move that Carol admits started her on the path which led to her current philosophy of learning and practice of teaching with an integrated curriculum.

It was after a course in action research that Carol began to realize "I can do this and I can do it in my own classroom. I can attend to my own professional development." Having always been outspoken and involved in education association issues, Carol saw classroom inquiry as a way to bypass what she felt was a lack of progress in her district regarding teacher leadership and professional development. Her master's thesis explored cooperative learning as an action research intervention and the role of action research in teacher professional development. She indicated that completing the master's was more stressful than embarking on the clinical educator role because she was more on her own. "At that time I hadn't developed the connections and support that I feel like I have now."

Carol explained that at some point in the future she would like to be in a doctoral program. She explains,

I certainly have always taken advantage of the reciprocal arrangement at the university so I see part of my work as clinical educator as a continuation and certainly a deepening in intensity of that opportunity...I've been in school here since, oh probably 1975 off and on, mostly on. But I'm a learner.

Upon completion of the master's degree Carol became more involved in professional development and teacher leadership within her district. She participated in a program taught by two university faculty members that enabled her to become a mentor for the district's entry year program for beginning teachers. As a result of that involvement, Carol was selected to participate on university-school committees that were formed to explore the professional development school initiative.

I was on a subcommittee so I was in the loop of information. I knew professional development school projects were coming and I knew I wanted my school to be one of them. In fact, the very first time I heard about the possibility of clinical educators I immediately placed myself in one of those positions. It was a goal I set for myself. If it happened I intended to be one of those people." Carol explained that her desire to become a clinical educator was not due to a personal agenda, but rather because she viewed the role as one of the first codified, named, teacher leadership roles.

Needless to say, Carol was selected as one of the first pilot clinical educators and the following categories help to tell her story.

PERCEPTIONS OF THE TASKS AND RESPONSIBILITIES

During the initial interview Carol made a statement that echoed throughout discussions with the other participants.

If I made a journal entry the predominant word would be overwhelming. I feel this awesome sense of responsibility...to my school first and to my district because they bought into this in a major way with a major amount of money.

Carol viewed her clinical educator work as experimental in nature. She tried many different roles, each, she explained, having its own rewards and challenges.

Some of the roles change with each university quarter and some are remaining constant throughout the year.

Here are some of the roles Carol assumed during the first five months of the pilot experience:

Salesperson/Role Model

Carol, when asked if her role this year helped to increase the involvement of more teachers in the PDS responded,

Oh yes, I can go around and talk to teachers and seek their involvement. I had the time to go talk to them. That's been very important. I would hope that people would see me doing different things and in some way...I might model certain behaviors. I can take some risks that teachers might not take until they see someone else do it. I hope that I have modeled good professional working relationships and risk taking behavior.

In a presentation at a national conference, Carol articulated her beliefs about the role and the characteristics she has modeled by saying,

A clinical educator is a person who values collaboration generally and school-university collaboration specifically and has demonstrated ability to work collaboratively toward professional development and instructional improvement; is an expert classroom practitioner who can articulate his/her beliefs about children, teaching and learning; takes risks and works at the edge of his/her knowledge; has a strong commitment to his/her own professional development and is willing to engage in continuing preparation for the role, and can tolerate a high degree of ambiguity.

Meeting Participant

Carol explained that PDS Policy Board Meeting days automatically become clinical educator days. Any university related meeting day turns the whole day into clinical educator work. Examples of the types of meetings Carol participated in include the monthly PDS co-coordinators meetings, PDS site committee meetings, and clinical educator meetings. Carol has also represented the PDS at university meetings and at conferences and serves monthly on the PDS Policy Board.

School-Based Teacher Educator

Like Karen, Carol works with one university faculty member that will be referred to as Betty. Carol laid the groundwork for clinical educator responsibilities when she enrolled full-time at the university last summer and held a graduate assistantship.

There was a group of seven of us this summer for which Betty got part-time assistantships. We met on a weekly basis and we designed the student teacher retreat and we also started thinking about the student teaching seminars. I taught the first student teaching seminar this past week. I had an initial three-day experience with the students, I've taught part of one of their classes, and I've taught one of the student teaching seminars.

When asked to respond to the question of how she thinks her role is perceived by the student teachers with whom she works, Carol said,

I hope the students see me as an intermediary. Betty, as director of the student teaching program and a member of the university faculty is a bit more removed from them. She does not evaluate the students formally - that is done by graduate assistants. I'm going to participate in doing some of the on-site observations and supervision. But I think they see me somewhere in

between and they probably don't really know how to see me. That's fine because I don't know how to see me.

Specific role responsibilities identified by Carol included co-planning and teaching preservice professional seminars; observation and feedback responsibilities as classroom supervisors for preservice teachers in field experience, student teaching, and internships; contributing to on-site collaborative inquiry, and assisting in dissemination and utilization of inquiry findings.

Specific tasks have also included coordinating, planning, and teaching student teacher seminars, assisting in student teacher placement, talking with teachers at the PDS site engaged in classroom inquiry, meeting with graduate assistants teaching student teacher methods courses.

Unlike the other three participants, Carol had a much more significant role in placing student teachers with teachers at her school site.

I feel like we really placed the students well..matching personality and what the students like....for instance, one student said she really wanted to focus on working collaboratively so she's with two teachers who are doing shared teaching. They have two classes but they work together and they teach together.

Carol has continued to work with the student teachers at her school, and again, unlike the other participants in the study, has had major responsibility in their supervision.

I'm doing the supervision for the four students placed at our school. I really want to spend a lot of time with them and in their classrooms at the beginning so when I have to start doing the more formal evaluations it won't seem so formal. I don't like to think of myself as being threatening or being viewed as an authority figure. So it's kind of a strange negotiation process I'm going through with myself. I've made a point to be in those classrooms for some

period of time every day that they've been at school so far. I'm taking my clinical educator days on Monday, Tuesday or Wednesday because those are the days the students are here - which disconnects me a little more from the university in certain ways because the other supervisors meet together on Thursday. I'm not having contact with them but I'm having more contact with the students and that's where my priorities are anyway. Plus more my time is spent at school and I like that too because for this role, this role needs to have benefit for my own particular school as well as when we work with the student teachers.

In addition to supervising student teachers, Carol has also had responsibility for providing instruction to the preservice students.

I taught a seminar on deciding what to teach where we looked at curriculum guides, course of study, teacher manuals, student tests, trade books, poetry, and non-fiction. We looked at how, when you're teaching in an integrated curriculum, you pull those things together into some kind of coherency and how you web those out with the children.

"The Linchpin"

Carol has been responsible for creating and strengthening connections between the school site, school district and university, as well as between PDS teachers, student teachers, and university TA's. Those connections have manifested themselves in the following ways; serving as liaison with district and education association about PDS, keeping a journal of PDS evolution and clinical educator role, authoring articles for district and university publications about PDS and clinical educator role, disseminating information to other schools interested in her PDS philosophy, serving on a planning and editorial board for a PDS newsletter and future publication series, assisting with school-wide implementation of an alternative assessment project and co-teaching a class of 26 fourth and fifth grade children with a first year teacher.

When viewed quarterly, this is how Carol described her tasks and responsibilities:

Autumn Quarter

Write funding grants
Supervise student teachers at school site through observation and conferencing
Participate in doctoral study on clinical educators
Journal with selected teachers at school site
Co-plan and implement student teacher retreat

Winter Quarter

Supervise student teachers at school site through observation and conferencing
Participate in doctoral study on clinical educators
Journal with selected teachers at school site
Assist planning and attend on-site PDS coursework

Spring Quarter

Assist with PDS evaluation
Evaluate clinical educator role
Assist planning and attend on-site PDS coursework
Collaborative inquiry on how engaging in classroom research affects teacher professional development
Write conference and grant proposals
Collaborative writing for publication

Carol and I were both in attendance at a PDS Policy Board Meeting where clinical educators were described by the group as being the "linchpins" for the project. In an interview held after the meeting I asked her how she felt about that observation. She replied,

The comment surprised me. That's an awful weighty responsibility. I think the PDS projects would still be functioning if clinical educators weren't here. The time constraints are so massive without anybody to coordinate what's going on. I see clinical educators as maybe keeping the effort alive at this point. So I guess in that respect I agree with some aspects of it but I'm not willing to put myself in the position of being the crucial player. I believe it's

important that someone be there to do the things that need to be done. Those things often, and rightly so, fall to the clinical educator. For example, the evaluation committee. Who would do that? I just don't see anybody.

The Recorder

Like two other participants in the study, Carol took major responsibility for compiling a written history of the PDS. Carol, however, differed from the other three participants in that she was the only one who consistently kept a reflective journal.

From September to November I was just kind of in a fog and running around like a chicken with my head cut off. Trying to get my own act together and I wasn't, I wouldn't have known what to write down so although I did do some entries during that period, I've been a lot more faithful and regular about it. I'm also using more of my clinical educator time just for those kinds of things because I am doing other writing. I feel like I have more time to do that or I'm able to devote more time to it now and I feel better about that. I think clinical educators were there to document.

Preparation for the Role

When asked how she could have prepared, if at all, for the role of clinical educator, Carol indicated that some type of orientation to the university would have been helpful.

As far as more specific duties that I've been performing...I think they're so specific to each site and the particular university person that you're working with, that I don't see how preparation of clinical educators could be done in any generic type of way. From what I understand, each of the clinical educator positions is construed pretty differently. Getting the clinical educators together early so they can start to make contacts within the group would be helpful. To see that there are other people doing what you're doing is affirming in some way. You feel like you're not alone.

Carol went on to explain that,

The crucial pieces were the background knowledge of why a PDS...you know, what's in Tomorrow's Teachers and Tomorrow's Schools. I would have just felt at a loss without that knowledge and without having participated on one of the sub-committees. It would have been a real deficit and I'm sure I would have felt even more overwhelmed.

PERCEPTIONS OF TENSIONS AND BARRIERS

Parental Concerns

Carol and her co-teacher, "J", planned their program together down to the very last detail and focused on consistency. Carol explained in one interview that the efforts had really paid off.

Parents were assured that we were working together to provide the children in our class with a high quality experience. Plus, we had parent meetings, answered questions, and met with parents a great deal. Only two parents really expressed concern during the year; one to us and one to a school administrator. We dealt with those issues quickly and moved on.

The school district support, exemplified through the hiring of a new teacher that worked part-time with Carol, was crucial to the success of the clinical educator experience. Hiring a teacher, rather than filling in with substitutes, afforded the type of consistency Carol, and her parents, expected for the classroom.

Use of Time

Time was viewed as a major tension by all four participants.

Serving in this role has affected my personal life through its extraordinary demands of time. Many days are ten to twelve hours in length.

As the role evolved, however, the participants became somewhat more adept at handling the time conflicts and demands.

My schedule seems to be more manageable in the way we've worked it out. I always have more things than I can possibly do and I'm starting to get comfortable with that being alright. My days continue to be long because there are certain things that when I'm at school...my priorities sometimes get reoriented because of things that happen or things that need to be done and there's no one else to do them so....

Release Time Logistics

Carol was extremely pleased with the ease in which her district administration accommodated her new role and the release time required.

I didn't know if my school district would buy into this and I'm still surprised, and continue to be, that they did. When we initiated our proposal we involved a school board member and our assistant superintendent for instruction. We had their support in writing and I'd like to think that made a difference.

In this particular instance the district decided to hire a full-time, contractual teacher who also holds a master's degree. The co-teacher substitutes for the district during the 50% time she is not in Carol's classroom.

My central office continues to be really accommodating in arranging the days that "J" will be in the classroom. They're bending over backwards to make it easy.

Carol explained that she felt a major responsibility to help facilitate the district's investment in the position. She made a concerted effort to take clinical educator increments in whole days so that her co-teacher was then available in whole days and could function elsewhere in the district when needed.

The only concern expressed by Carol was that she and her co-teacher had taught together the first month of school. Since the clinical educator position was funded at half-time, she worried that she was in the hole as far as the number of days used. During the later part of school year, Carol indicated that she had made up days here and there and was finally "even".

Sense of Efficacy

When asked if she was enjoying the experience she said,

Oh yes...although I'm not enjoying it any more than I would being in the classroom because I get such intense satisfaction from being in the classroom with the kids. I don't think I'm enjoying it more, but I am enjoying the variety of activities that I'm engaged in. I really like the interaction that I'm having with the university people - that's a new perspective so that's been very positive. I like being able to work on things that I hope are benefitting the school at large. But I still feel the tension between doing things that are related to my classroom and doing things that are indirectly related.

One of the most enjoyable aspects of the clinical educator role identified by Carol was the fact that she was able to spend a significant period of time in the classroom with another adult and one that was as competent as her co-teacher. When asked if she believed her new role had made a difference in teachers' day to day lives in school, Carol responded,

In some respects I think it has because many of the things I've done have been to take ideas that the staff has initiated and written about them, or published or summarized them for us to use. For instance, I'm starting on a series of papers, overheads, and pamphlets for us to use in parent meetings to explain our alternative assessment. Moving to that assessment has been our big project this year and I really think I've been able to facilitate the process. A lot of what I've done has not produced a product. So in that respect I would be hard pressed to lay out on the table and show people the process

I've gone through. As far as writing produced, that may change Spring quarter.

Future Professional Directions

An area discussed with each of the participants was how they viewed themselves in the future in relation to their own professional development and career paths. Carol responded,

I'd like to be involved with the university. It's been important in my professional and in my personal life for a long time. I'm a compulsive learner I guess. I would see myself somehow involved at the university level in the future. Whether it was continuing to take courses or maybe one of these days I'll grit my teeth and take the graduate record exam and pursue a doctorate.

Like the other participants of the study, Carol conceded that, if given the opportunity, she would be willing to serve in the clinical educator role for a second year.

A lot of people in my district have asked me if I will do this again next year. I just have refused to speculate. Today I'm just worried about getting through this year and doing a good job at what I'm doing. If offered, I would probably do it again. There has only been one day that I said no I can't, I won't. I think it was just a bad combination of situations. But I really am enjoying the diversity of what I do. I love having contact with the people at the university level.

Carol summarized the tensions and barriers associated with the new role of clinical educator well when she said,

It's just so much newness...that's one thing that I'm finding difficult to deal with...all of the changes not only within my own role, but within our school as well. I think they're changing for the better, but that change always brings a certain amount of turmoil.

PERCEPTIONS OF THE CULTURE AND CONDITIONS OF SERVICE

Sharing a Classroom

Like Karen, sharing a classroom was a major change for Carol and an important consideration in accepting the new role.

Because I'm an elementary school teacher the big challenge for me, and I thought about this all summer long, was that if this role happens and I'm selected, what will happen in my classroom and how will that look? My immediate concern and my first concern was the quality of my classroom. I couldn't have hoped for anything better than what I see happening now. My principal and I selected the individual with whom I would share my teaching assignment.

Carol emphasized how strong her feelings were regarding this issue by stating, "I could not have accepted in good conscience the clinical educator position without knowing that there was a person who had a commitment as strong as mine to our classroom." Carol and her co-teacher, using clinical educator release time, worked together in the classroom for the first four weeks of school which allowed for negotiation in how to work together. The time also allowed the children to see them negotiating the classroom, an experience which is consistent with the philosophy of the school; a philosophy based around collaborative decision-making.

Because of the nature of the way I'm co-teaching, there is a constant pull at the back of my mind... although its much better than what I've experienced in the past. I can leave my classroom and not think about it because I know what's happening there. But I still have a major responsibility for the planning and for the evaluation. I'm thinking that that will evolve too and that my co-teacher will take more and more of that responsibility. So I'm not worried about my classroom because I know I will preserve the quality and continuity there because that's my first priority. I guess what I'm worried about, is that by making that my first priority, the other things become my second priority. There has been nothing that I've been to this year that I felt like I've been as prepared as I wanted to be.

Carol explained that she had taught for a long time and had incredibly strong ideas about the way things are done in the classroom. Her strong beliefs are what ground her practice and she was concerned that she might overwhelm someone with no experience. She wanted the co-teaching to be a collaborative experience for both teachers. As it turned out, the co-teaching experience has been labeled a success by both Carol and "J".

I think there is always value in having to make your practice explicit to other people and I have certainly had to do that.

Carol and "J" worked out a time whereby both could be together one day a week in the classroom. The arrangement maintained the continuity they developed at the beginning of the school year so that the children continued to see both of them as their teacher.

It would not have worked for me to just teach in the morning and not afternoon because my school is grounded on looking at the curriculum as a whole, the child as a whole. So for me to say I was going to teach reading, language and whatever, that would have been philosophically inconsistent with the very foundation of our school's philosophy.

When asked to describe some of the actual day-to-day arrangements that had been made between Carol and her co-teacher, Carol indicated that even when "J", her co-teacher, is going to be elsewhere in the building or district, she comes to their classroom first thing in the morning so that they both can discuss what will be happening there during the day.

So even if she's not going to be here, she knows what we're doing and vice versa.

Carol also explained that it seemed to work out better for her and her co-teacher, for each of their time with the children to be spent in a block.

It took a while to evolve that way in our work together, but we have found that it works out much better for both of us.

There's was only one instance when Carol voiced some frustration about sharing her classroom.

I'm really disturbed that my classroom display is not as good as it was because I don't have the time to put into it. Sometimes when 'J' does things with the kids, I just have to bit my fingers and jerk my tongue out to keep from you know, saying something that I wouldn't want to say. That doesn't happen very often.

Peer Perceptions and Home School Setting

While serving as a clinical educator, Carol has been actively involved and has provided leadership in developing a new reporting/alternative assessment procedure at her school. In addition to working with fellow teachers and university faculty to develop the procedure, Carol also assisted with meetings to help educate parents about the new reporting methods. She also wrote several articles for district publication explaining the new reporting process.

Carol met with administrators from her district's central office about her new position so that she could report to them about what she was doing.

They have not asked for specifics, but I feel like it's a way to keep them informed of what we're doing in relationship to our Professional Development School project. When I told the assistant superintendent what I was doing her comment was that the University was really getting its money worth from the clinical educators.

Unlike any of the other participants, Carol appeared more comfortable in articulating her new role and responsibilities to others.

People continue to ask me and are very curious about what I'm doing. I'm always eager to list all of the things that I'm doing for them. It's not the people at my school who are asking, they know and they see me doing it. It's people that I come into contact with elsewhere in the district during the course of my other district work that ask.

The University Connection

Carol pointed out that she was aware of the historical and political university oriented top down change agenda that started the whole Holmes initiative, but at the same time she, and she believed her colleagues in the other schools, valued their ties with the University so much that they didn't want to see those ties go away. Aside from that, she explained, the university was "the only game in town."

Carol expressed concern over the way decisions were made at the university regarding PDS courses and the priority they received in relations to other programmatic commitments of the College.

We (teachers from her school as well as several others in the local area) get together on a monthly basis with Betty to work on PDS issues. I don't know the chain of command or the procedure involved in offering a course on site, but Betty has been denied permission because of the funding situation. That's difficult to accept, particularly since this is the first time that there is a group of people that really want to do this.

Having been a student at the university for two degrees, Carol was not concerned by the size or bureaucracy around which one needs to maneuver. She did express an interest, however, in the possibility of receiving some type of orientation

to the College of Education prior to assuming, or immediately after assuming the clinical educator role.

I think it would have helped me to be more familiar with the college structure. What are the expectations for graduate assistants? What are they doing? How are they responsible for the coursework? I guess each site and each department would be different. Even the decision-making structure would have been helpful to know. Who is that person? What's he or she responsible for?

When asked what may have prepared her to be successful in the new role,

Carol responded:

For me, previous university and school district experiences have proved invaluable in helping me cope with the diversity of the roles I am filling. Those experiences included:

- masters work in teacher professional development;
- familiarity with qualitative research methods;
- educational supervision coursework;
- knowledge of and experience with conducting action research in my own classroom;
- work with university committees developing guidelines for OSU professional development sites;
- involvement in school district entry year program, and
- involvement in education association teacher leadership development program.

SUMMARY

Carol was noticeably different from the other three teachers in the study. Carol exhibited a self-assuredness that was not seen to such a degree in the other participants. She was very thoughtful and reflective about the new role. What was it that accounted for her well-seasoned view of teacher professional development?

One possible explanation could be that she understood what it meant to be a risk-

taker. That understanding, combined with previous leadership development opportunities and responsibilities in her district, could have contributed to her comfort level in assuming the new role.

When asked about future directions, Carol was the only participant that indicated she would be perfectly willing and happy to return to the classroom full-time. Carol also seemed to be the one participant who felt the greatest affinity to the university. In other words, she explicated a greater sense of belonging than did any of the others. Greater participation and ownership in teaching university courses, the university faculty member with whom she interacted, and her history of consistently enrolling in graduate courses for her own professional growth and development could have been factors that contributed to this ease of fit. Carol even indicated during one interview that she considered herself to be a "learner." What that means, and how it may impact on new roles for teachers warrants further consideration.

Profile #3: A Clinical Educator in Two Site PDS Setting: "JoAnn at Lincoln Elementary School"

JoAnn began her 26th year of teaching last Fall. She has taught the first, second, third and fourth grades, but most of her professional career (17 years) has been spent with first and second graders. Twenty-two of those years have been spent in the district where she currently teaches, which is a suburban, middle-class community. Her first three years of teaching were spent in a small city school system, while the next year and a half was devoted to teaching in a rural setting with

a large population of Amish families; a setting in which she felt quite comfortable because of her family background.

JoAnn grew up on a farm and was the middle child of three siblings. Her parents explained to their children that they could only afford to send one of the three to college. Neither the older or younger sibling was interested, so JoAnn proceeded to be the first to pursue a college education in her family. However, though she was the first to formally receive an advanced degree, her grandparents, aunts, and great-great grandfather had all been teachers. JoAnn attended a university within 60 miles of her home and was enrolled upon entering as an elementary education major. "Somehow I'd always known that I wanted to be a teacher."

In describing her career, JoAnn was quick to point out that she had always done things a little differently. "I was asking my principal to remove all of the desks in my room and devising learning centers long before 'informal classrooms' were talked about," she explained. Upon moving to her current location, JoAnn frequently enrolled in graduate courses at the nearby university, but never pursued a formal graduate degree program until 1988. She explained that the impetus for pursuing a master's degree came from her frustration with the school situation at that time. "I felt as though I had absolutely no professional support system in the school building, and so I knew I had to create one for myself. I needed to hear that what I was doing was right." JoAnn completed a master's degree in elementary education and also received supervision certification.

Her school building, together with another elementary school in an adjacent urban school district, created a partnership that became one of the first of seven Professional Development School projects. The teachers and principal in JoAnn's building decided several years ago that they wanted to infuse much more multicultural learning experiences, for both children and staff members, into their educational programs. They actively sought a partnership school in the urban district, and once located, began the PDS project two years ago.

JoAnn had been one of the more active teachers involved in the initial groundwork required to form the Professional Development School project. She also attended the first of many meetings held between university faculty and county school personnel to learn more about the PDS initiative. When the announcement of pilot clinical educator roles was released, JoAnn knew the role was something that she wanted to pursue.

PERCEPTIONS OF TASKS AND RESPONSIBILITIES

Common threads run across each of the participants in the project regarding their individual tasks and responsibilities. Many of the categories which follow are similar to the first two profiles, but there are also unique differences in how JoAnn perceived her clinical educator responsibilities.

Meeting Planner and Participant

Like Karen and Carol, JoAnn was overwhelmed with the time required for meetings.

On one day alone I've had a meeting with the PDS steering committee, a meeting with the methods teacher and the other clinical educator in our project, and a meeting of all the clinical educators associated with the Professional Development School initiatives. I set up meetings for the PDS steering committee, for the methods teachers at the university, and also for the other clinical educator, our university faculty contact and me to work on the PDS course syllabus.

JoAnn explained that her emerging role was a struggle because she needed to attend a lot of meetings, but there remained the "daily grind jobs" to be done. A daily activity involved writing a "to do" list of the tasks and responsibilities she needed to accomplish. The list has included things like making copies and distributing a map to PDS participants for the next meeting, helping to facilitate admission to Ohio State for one of the teacher assistants in the building who has taken some of the PDS classes, and working on the computer and learning how to use E-mail.

I'm trying to figure out how to motivate more people to use E-mail. I've used it to send out newsletters or announcements to groups, but haven't mastered using an alias. Another item that takes time is getting three of our teachers registered for the PDS course that missed the deadline for computer registration. Something relatively simple like registering three people can take an unbelievable amount of time and phone calls at the university.

News Reporter

Unlike the first two participants, JoAnn never described her role as one of sales or persuading teachers to become involved in PDS work. Her descriptions painted the picture of a transmitter and reporter of information. She made sure that communication between the principals of the buildings, the university faculty member and the PDS teachers was as open as possible. It was JoAnn that made sure people knew about course enrollment deadlines, PDS course assignment requirements, and the dates of special PDS project activities. JoAnn also made a concerted effort to keep her school superintendent informed of her activities.

One of my tasks was figuring out how to get the PDS course readings to everybody in the class. I was sent through the hoops in trying to run off the materials. First the university said it would pay and then decided not to. Then the district said I could do it here but I'd have to run them and collate them all myself. That didn't seem to make much sense time wise. I wasn't hired to sit there and collate papers all afternoon. I eventually took them to Kinko's, paid for the job myself, and then charged each of the class participants. I just made the decision on my own like that. The teachers are getting college credit for the course so they're the ones that should be paying for the materials. At this point I've used no secretarial help at the school. I've done all of this on my own and that is time consuming.

PDS Site Visitor

JoAnn believed that she was visible to the staff at both buildings, but more so at her own because the time spent there. She explained that she'd like to do more.

Our principal is busy doing all the principal things. I really don't think she has time to do all the other parts and those are the parts that are exciting to me. I don't want to be a principal and deal with parents and all those other legal issues. I would like to have more time to work with teachers. Where I am right now personally is trying to decide am I going to be brave enough

to just go ahead and say to people, is anyone interested in brainstorming about our last speaker (ungraded primary)? I'm trying to decide how brave I am to go ahead and do that.

JoAnn regularly visited the partner school and informed those classroom teachers that she wanted to do more than just come in and sit down and be an observer. The reason for visiting was so that JoAnn could become better acquainted with the teachers and students and with what was happening in their classrooms. As a result, she often tutored students when visiting.

Field Experience Coordinator

One of the big things we've been working on is getting ready for field experience students. I think as a new site we have really taken on a lot of different responsibilities. We're not only growing as a PDS site, but as classroom teachers too. There are so many things going on that staff are sometimes overwhelmed. They want everything that's going on to continue, but the problem is it's happening all at the same time. We're looking at the possibility of moving towards an ungraded primary and more research and classroom visitations as part of our PDS project, while at the same time bringing in 32 field experience students between just two schools.

When asked about the large number of students and how it was decided that two schools would be responsible for supporting that many, JoAnn responded that,

We asked if there was something that we could do about the large number, but were told it was really all or nothing. As a result, it means almost one student teacher for every classroom teacher in the two buildings. In some situations we have new staff members so it's not appropriate to place somebody with them. It's difficult to provide 32 people with a worthwhile experience when in reality you only have 26 good sites for them. We're looking creatively at placing two students in one classroom with teachers that are particularly skilled and that are willing to assist in that regard. The situation seems overwhelming, but both staffs are also excited.

JoAnn has helped to buffer concerns teachers have had about student teacher placements. She acts as a sounding board for teachers that need to vent frustrations and then reminds them of the joint decision made by the staff as a whole to accept the strand of students.

There was one teacher that began to complain during the day, not to her university contact, but to other staff members and so I tried to talk to her about it and she was real huffy...saying that she didn't know anything about this. She said anything that said PDS she threw out because she didn't think she was involved and now she has this student... Well she had the opportunity to know but she chose not to. We talked about the student teachers at staff meetings and she chose not to read any of the articles that were sent out in newsletters. So I decided these weren't my issues then. They were informed and if they had had these concerns then they should have talked about it.

When asked if the teacher had come directly to JoAnn to express her concern, JoAnn indicated that she had not. JoAnn had learned through the grapevine that the teacher was displeased and decided it was something that needed to be addressed.

The first thing we want is a positive experience for field experience students...so I wanted to deal with it firsthand.

Prior experiences with student teachers in the school have focused on a small core of teachers who have chosen to be involved. JoAnn suggested that part of the problem may have been that some teachers felt imposed upon...they really had to become involved.

I then asked if JoAnn had assisted with the placement of field experience students. She said that she had had no part in their placement. She had given a list of staff names from both schools to the university faculty member responsible for the strand of students, and he had randomly assigned students to teachers. On top of her

new responsibilities, JoAnn also accepted a student but is very pleased with the individual assigned to her classroom. She reminded me that the teachers were pleased with the new schedule they helped to devise. The students now remain at the school from 8:00-2:00 so they gain both morning and afternoon experience.

When asked if she felt her new role impacted on the flexibility of the university in changing its preservice education schedule, JoAnn replied,

I feel like I did because you know we always have a hard time communicating. A staff may feel a certain idea is important and talk about it at a meeting, but it never gets any further. By me having a contact person with the university that I could share the staff's ideas with, he could then turn around and pass along the information to the methods teachers. I felt very important. I felt like I had an important job in doing that. Right now the coordination isn't taking much time, but I think as issues come up or if there is any problem between a field experience student and a classroom teacher, I'll be the one they come to. Of course, I've encouraged that. When I introduce myself I say I'm here to help in any way that I can.

When the staff talked about supervising and evaluating the student teachers, they indicated that they would prefer JoAnn assume that responsibility. Of course, the time constraints don't allow for that to happen. It was positive for JoAnn, however, to know that the teachers felt that type of confidence regarding her abilities.

Grant Writer

At some point during interviews with each of the four participants, they all mentioned that a part of their clinical educator responsibility was to seek funding for the PDS projects in which they were working. JoAnn was successful in writing a grant for internal monies available in her district for new and innovative projects. As

part of the grant she was able to purchase multicultural books that were available to the teachers in both buildings.

The Historian

Like the two participants depicted in the first two profiles, JoAnn had responsibility for keeping a history of the PDS project. Much of the history has been recorded on videotape while at the same time JoAnn has kept a written record as well. In addition to historical notations, JoAnn also assumed responsibility for the preparation of interim reports required as part of the Professional Development School project initiative.

The "Gopher"

Several references were made to the frustration of the having to do tasks that seem a misuse of JoAnn's abilities and time. Many of the duplication and collation tasks are examples of what JoAnn felt were inappropriate, but necessary because there was no one else to do them.

Sometimes everyone thinks I should do this job and this job and this job. Nobody will raise their hand and volunteer. They simply say, 'well JoAnn you ought to do it.'

Preparation for the Clinical Educator Role

When asked how she may have been able to prepare for the new role, JoAnn was quick to point out that she didn't think it would be possible; each project and

clinical educator would be so different. She did share, however, that she was uncomfortable initially when she had discovered there was no formal job description or "boss" to whom she was to report.

At the onset of the new role I asked the Dean who would be my boss for this and she said 'I don't know JoAnn, I think it's the project.' That was an outstanding answer because that's what you're working towards. I think if we train clinical educators too much we're really going to limit them and say the role has to fit within these parameters. The part I love of this job right now is I don't have the parameters. It's what I make it and also what the staff wants it to be and how much time we all have to put it together.

PERCEPTIONS OF TENSIONS AND BARRIERS

Status

A problem with role identification was raised by JoAnn at the beginning of the year. JoAnn's concern surfaced when the project co-coordinators (JoAnn, the university faculty member, and the principals at both schools) were sent a memo regarding additional funds for PDS projects. The memo requested a response, but there was not much turn-a-round time. JoAnn explained that,

The two principals talked it over amongst themselves and said 'we're going with this and we're going to send it in' and they didn't ask me for any input. I felt funny at the time. I thought, do I just say excuse me let me say something or is this their position to make a final decision? It put me in a spot that I didn't quite know to handle and I think that's when I first started to raise the issue of what is my role and what is the role of the administrators. Initially I thought it was a collaborative endeavor. I was confused by this process. One of the principals was glad that I brought that up and we started to talk about it some last night.

In a later meeting it was the university faculty member that suggested the project be viewed as having three co-coordinators, not just two. Another example of

similar tensions resulted when the university faculty member requested that all meetings related to the PDS project be video-taped. When JoAnn mentioned that she was taking video equipment to a PDS steering committee meeting to her principal, the response from the principal was, "Oh, I thought that meant just between Henry (the other school building principal) and I." As JoAnn explained,

To me that comment was kind of revealing. I said to her no, we're talking about collaboration. That means that people on all levels in this project meet together similar to what we're doing in the steering committee today. She said okay. She was fine with it, but I thought that was interesting how she perceived that.

When asked to explain her perceptions of how collaboratively the meeting had progressed, JoAnn responded that she wasn't sure that there had been a truly collaborative discussion among the group. There was, however, a healthy exchange between the administrators and faculty member. Occasional comments would be solicited from the rest of the participants (teachers). She added that the university faculty member was good at bringing everyone into the discussion.

Sense of Efficacy

I can go one day, and part of this is my personality, and be kind of down like. I'm not getting everything done. Are we a good PDS site? Then another day I get all excited about it again. I hope to stay in the upper end of it. It is a responsibility and I guess probably that's what I'm reacting to. I want this to be really good and I want to do a really good job. I want our two staff to do a good job. I feel responsible in a lot of different ways.

JoAnn explained that another aspect that she liked about the role was going to workshops and the research retreat.

I love to sit and talk with the university professors and explore new ideas. They like to hear from me so I feel valuable because they like to hear what's going on in the classrooms and school itself and I like to hear more of their readings. This is a real plus for me. Somehow I'd like to be the one that can put the university research and theory and practical school life together so that really good programs are designed. I constantly think about which staff member would be interested in this new idea. I feel good gathering the information, but I don't want the information to just come to me. I want it to go on to our staff.

Another feeling I have is that if we don't continue the job of clinical educator the kinds of projects that we saw last night will be almost non-existent. We'll go back to staff development only done during staff meetings. Our principals just don't have time to do any more than what they do.

Financial Constraints

More than any other project discussed in this study, JoAnn's PDS steering committee appeared to spend a considerable amount of time and discussion on how their limited PDS money could be utilized. Not only did the steering committee need to prioritize funding requests within the project, but they also were required to respond to teachers in the district, many of whom were not actively involved in the PDS project, who viewed them as a possible source of financial support for innovative projects dealing with multiculturalism or diversity. The superintendent even directed a teacher to the committee to solicit possible funds or release time support (which would come from JoAnn's "free" time). Being the eternal optimist, JoAnn said,

At least we're trying to creatively look at all the different monies available for our use. That's exciting.

Transportation costs are an issue for JoAnn because she travels frequently between the two schools and the university. She indicated that the project steering committee wanted her costs to be taken out of the \$500 account, but she refused. She believed that the university needed to look at transportation costs as a separate issue that affects all clinical educators. JoAnn later added that her principal had expressed a desire for the university to better support her clinical educator role financially.

Use of Time

As with the previous two participants, time was a major tension identified by JoAnn. Her inability to devote as much time to planning was a major concern initially.

I just find teaching in the morning and then doing this job in the afternoon leaves me with no time for planning. To sit down and actually plan out a good unit or preparing the materials...the time just isn't there. I think that's been a big struggle for me. I have to take time out of the afternoon job and then there's still stuff from there so then I'm doing that at night. I struggle for time and getting things finished.

University Gridlock

JoAnn emphasized that she was sure many teachers were not taking the PDS course because they didn't want to deal with the hassles of the university. She went on to explain that the hesitation of teachers to become involved for that reason was something that the PDS steering committee had not anticipated.

Our staff, both staffs, nobody likes going to the university because you can't find a parking spot, it takes forever to register, etc. They don't even like

going to pick things up at Kinko's. I try to alleviate that whenever possible. I'm still trying to clean up registration messes from last summer. The university actually wants the teachers to go to campus, walk to University Hall with a picture ID and get their access code, just so that they can then turn around and call in their class registration on the telephone - for convenience (laughter). I was willing to go down and get everyone's access codes, but they said it wasn't possible. We knew some of these issues were there, but it seems to be a lot worse than expected.

Future Directions

JoAnn repeatedly, in the majority of interview sessions, expressed a desire to continue in the role in order to find new challenges before retiring from the teaching profession. She also indicated a great deal of interest in being able to end her career a few rungs up on "the ladder".

I would like to keep doing this. I really would. I'm a little frightened at times because I don't know. If the position is open to other staff members I can understand that and accept that. I personally hope I get to do it again. I think for someone else to come in right away on the second year, they'd be reinventing the wheel all over again. I'm also looking at retirement from classroom teaching, but I know that I still have a lot of ideas and I'm not truly done yet. I can still teach elementary school and I'm fine and I'm happy, but I am enjoying going a little higher in the career ladder. I would be interested in doing something on the university level.

PERCEPTIONS OF CULTURE AND CONDITIONS OF SERVICE

Sharing a Classroom

JoAnn's experience in sharing a classroom has been different from Karen's and Carol's in that the teacher is an experienced practitioner and not a novice. The co-teacher has also been actively involved in the PDS project. JoAnn's co-teacher

has over ten years of experience and has been in the same school site for a number of years. The co-teacher is very familiar with the books currently being used in their classroom, but they are new to JoAnn. The only comment ever made by JoAnn in regards to sharing a classroom was as follows:

I addressed with the children one day that when we leave the classroom, it needs to be clean and tidy for the next teacher. Well the next teacher doesn't always believe the same philosophy. I would come in the morning and I would be putting away books the children had pulled out the day before. I would resent that I had this amount of time to get ready for the day and I'm cleaning up from the day before. I didn't feel comfortable to address the teacher. I approached the children and I never criticized the teacher or anything. I said I'm really concerned that when I come in the morning there's a lot of books out. That is your job to put them away when you're finished. So now I've noticed in the last two weeks that I haven't had to say anything. When I come in the books are all put away and the room is cleaned up. In assuming this role I only have so much time. How can I budget my time? Well part of it is not doing room maintenance.

School Site Setting

JoAnn, in describing the two schools involved in their PDS project, explained that both buildings had recently moved towards a more collaborative approach to self-governance and decision-making. However, she also felt that it was still difficult for the principals to give up the perceived power they were losing as a result of moving in that direction.

We're looking at the idea of trying to coordinate staff meetings and inservice activities together - both schools. I also think that if we had a clinical educator from both schools, our staff would be more comfortable with letting that person come in and visit in the classroom and do things with the children, etc.

JoAnn was not certain about how her principal viewed her clinical educator role.

I'm not real sure...I think my principal is fairly positive about what has happened with my role this year. I don't know.

The PDS Connection

"We keep adding. It seems like our project is so multi-faceted."

In this particular project an "informal" clinical educator has been working in the building where JoAnn is not a staff member. She is included in all planning meetings, is teacher leader in her building, and has assisted in the planning and implementation of PDS courses offered through the university to the teachers at both schools.

The first grades from each of the schools are doing interactive activities. Each student has a pen pal that they write to and one first grade class has begun sharing video taped sessions of their classroom. The fifth grade classes are also starting to write. Children from the fourth and fifth grades at both buildings drew for the United Way poster contest. We're taking the winners, the one's whose work will be shown at the State House, downtown where they will meet each other for the first time and have lunch together. The two schools had a limited number of teacher visitations last year, but have not yet implemented a formal exchange of staff.

Because the PDS is responsible for such a large group of student teachers, the staff from both schools have requested more information on supervision. The university faculty will be incorporating information and readings on supervision in the PDS course.

The University Connection

In our PDS class meeting I told our teachers that they always have comments about how they wished the university would do this or that or would accept input from practicing professionals in the field. I told them that being involved in the project and working with student teachers would provide them with the opportunity to voice their concerns and questions. So we brainstormed and came up with a lot of ideas of how we would like the methods field experience and student teaching to proceed. We compiled a long list and shared it with the methods teachers at the university. Unfortunately, when we shared these ideas, limitations and parameters were placed on us.

Examples provided by JoAnn included the number of students being placed in the two schools and the placement of student teachers in the Fall. They're concerned that they're not required to start teaching until the end of September. As a result they miss all of the important instructional techniques that occur at the beginning of any school year. They need to be here while teachers are setting up their classrooms. The teachers also wanted to have student teachers in their rooms for longer blocks of time so that they could observe classroom continuity. After expressing these ideas, the university response was that schedules just couldn't be changed to accommodate the requests nor could classroom space at the university be arranged.

The teachers were not deterred. A combined staff meeting was planned and one of the methods teachers from the university was invited to attend.

The meeting was really rather negative because people rehashed their concerns about the number of students and the inability to have student teachers placed as soon as school starts in the Fall. I think the faculty member was overwhelmed. In fact, he left telling me to call him tomorrow after everything blows up. I knew that wouldn't happen. The teachers were still enthused but needed an opportunity to gripe.

The university methods teachers eventually accommodated some the school teachers' requests. A schedule was designed by JoAnn and one of the methods instructors that would ensure that student teachers eventually spent major blocks of time in the classrooms. "We actually made an impact," said JoAnn.

I told the faculty member that once the teachers offered input and ideas, they couldn't very well be ignored. The teachers really feel that some of the parameters set by the university are very limiting and don't allow us to prepare future teachers in the way we believe they should be trained.

SUMMARY

JoAnn's tasks and responsibilities could have been described as more of coordination. Which, in light of the fact that there were three other "official" co-coordinators named to the project (two building principals and one university faculty member), leads one to believe that all of the players need to revisit individual roles and responsibilities. Does more direct leadership need to come from various sources? Role reporting lines were also more fully discussed and elaborated in this case.

JoAnn, unlike any of the other participants, recognized the nature of "job-embedded" staff development possibilities within the PDS project. The barrier that

seemed to impede those possibilities was an inability to team-build within the school buildings. JoAnn expressed a healthy comfort level in pursuing various agendas with the teachers in the partnership school, but explained that she was not very comfortable in trying to move the teachers in her building in a certain direction. School climate, principal support, leadership skills and individual personalities all impacted on the work being carried out in this PDS. A large strand of field experience students from the university appeared to be viewed more as a deterrent to the work of the PDS than as an enhancement.

In addition to teachers, children from the two schools were also collaborating across sites. An international fair, multicultural poster contest, and field trip to the capitol were just a few of the activities conducted with children from both sites. Compared to the other participants, JoAnn's classroom teaching and the work of the PDS seemed more interwoven and interrelated.

Profile #4: A Clinical Educator Teaching in a University Program: "Gary at McArther High School"

Gary is one of four, out of a total of fourteen, clinical educators not directly tied to a Professional Development School Project. He is a secondary teacher housed within an urban high school identified as a PDS project, but the clinical educator role for which he was selected does not emanate from that project. Rather, his particular role description is derived from a particular series of coursework at the university that

is part of the overall teacher preparation program. The role was described in the call for applications as:

Two clinical faculty positions in the Professional Introduction to Teaching Program will be available to public school personnel interested in teacher education. The individuals will teach either an undergraduate section of Education Theory and Practice 450 (Learner Development) or 451 (General Methods) with all the responsibilities of other instructors in the program. Teaching assignments include 9 hours each week of classroom activities, discussion, and field experience. A weekly seminar for all instructors is required for the purpose of collaborative planning and professional development. In addition, a general orientation to the program is held prior to the beginning of the quarter for all instructors where the curriculum and instructional strategies are introduced, discussed and experienced (College document, 1992).

Having taught for a total of 24 years, all of which have been in the urban district in which the university resides, Gary has a wealth of experience. In fact, he explained during the first interview,

One day I was just sitting in a chair and I realized that you people are paying me for my years of urban experience. I may not know 'a lot about psychology, but there's probably nobody in the school system who knows any more about urban education experiences than I do.

When asked why he had entered the field of teaching, Gary shared that he had always been involved with kids...even as far back as junior high school when he coached a basketball team. During his teens and early twenties he taught tennis lessons and worked as a camp counselor.

I really liked that role. I liked working with kids. When I went to college, I think I had it in the back of my mind that I was going to be a teacher, but I waited a long time. As a matter of fact, I didn't do my student teaching until the last quarter of my senior year.

Gary explained that he didn't even remember taking education courses. He is an English teacher and so courses in that area were what stood out in his mind about his college experiences. His graduation from college happened to coincide with the Vietnam war and a deferment that was about to run out. In Gary's words...

I lived in Boston. After I graduated there were no teaching jobs at all. My draft status was changed to "fresh meat" and I was ready to be taken in. So I started to hitchhike across the country...I was always kind of a passivistic type of person so I didn't know if I'd be able to go in the army. When I arrived in this city, I was looking for a job and it was early September. I ran into a friend of mine that told me to go the university because they'd probably have a listing of the teaching openings in the state. Someone in the placement office called the city board of education office for me and they asked me to come in for an interview that same day. They said they didn't have any jobs, but that I should wait a day or two. Well, I had travelled another 400 miles, or so, west of here, but I did call back after a couple of days. Believe it or not they told me that one of their teachers had just quit and so they had a job for me. I hitchhiked back and my first job was at a junior high school near the university.

Gary went on to explain that during his first year he had three double period classes with anywhere between 38 and 40 kids in a class. There were no text books, he had no background in working with minority students, and the position he was in had a history of 10 years in a row where no one had survived an entire year. The teacher he had taken over for had lasted two weeks.

My first year there was just absolute living hell. I had done my student teaching in a very, very rural community in western Illinois. Discipline problems just didn't exist. I walked into a situation of a deteriorating building, racial strife and classes with 38 or 40 kids.

Because Gary's first year of teaching was so difficult, he believes it's one of the reasons he was successful as a mentor in a formal program operated within the city school system. "I think I have tremendous empathy for any first year teacher

who really is struggling." While at the middle school Gary supervised a number of student teachers and also devised a special English program. When the city moved from junior highs to middle schools, Gary transferred to the high school. It was after nine or ten years at the high school that he applied, and was hired, as a mentor for beginning and struggling teachers in the district.

After my first year as a mentor, the number of new hires was way down so somebody from the Board asked if I would like to work with university student teachers. Well, that was a wonderfully exciting year. I just absolutely loved it. I essentially took over the role as the university supervisor for about 25 students. I ran the seminars, completed the observations, and conferenced with all of them. I had a wonderful year.

Last year was Gary's final year in the mentoring program which requires a three year commitment. As a participant of that particular program, Gary was not assured of returning to his original teaching position prior to becoming a mentor. So while waiting to hear where he was going to be placed in the district, Gary also awaited word about the clinical educator position for which he had applied. Notification of both positions came through at about the same time, and real meaning was given to starting a "new" school year. With all of the changes and challenges that Gary has faced during his teaching career, he was certain to emphasize the following beliefs during our first interview,

To kind of sum things up, I always knew that I was going to be a teacher. I mean, I just kind of knew that. Maybe it's my personality type. Maybe I like to give orders. I'm a planner, an organizer, and I've always liked kids. If tomorrow was the first day of my career I would be in a classroom somewhere.

As with the previous three profiles, Gary's story is described around his own perceptions of tasks and responsibilities, tensions and barriers, culture and conditions of service, and teacher education and school improvement. Because his clinical educator role focused more on assuming university teaching responsibilities than working within the context of a specific PDS project, his profile differs from the first three in that his school site setting did not impact as much on his role, nor did he deal with PDS related issues. Gary's experience focused much more on becoming a member, or the inability of being able to become a member, of the university community.

PERCEPTIONS OF THE TASKS AND RESPONSIBILITIES

As was mentioned earlier, Gary's role responsibilities were much more narrowly defined than the others in the original clinical educator announcement. He came into an already established program within the university which addresses the first introductory courses in which students interested in pursuing teacher certification must enroll. The courses serve approximately 400 college juniors each quarter and are taught by graduate teaching associates. In addition to working with the graduate teaching associates, Gary also worked with a faculty director for the program and a graduate student who served as "co-director". Another important aspect of Gary's experience was that a second clinical educator was also serving in the same capacity. Like Gary, Donna was a high school teacher in the city district and had worked as

a mentor teacher for the past three years before applying and being selected as a clinical educator and so the two knew each other previously.

Unlike the other participants in the study, Gary had accessibility to peers during his pilot experience.

We have our own little support system. I don't know whether the other clinical educators have the same situation. I have nine other soul mates upstairs who have been wonderful.

Gary went on to add after our first meeting,

I thought the mentoring program was probably the most exciting experience I'd ever had in teaching. This easily tops it. It has been terrific.

Links to the mentoring program were made by Gary in relation to how that experience has enhanced his ability to fulfill the clinical educator role. As a mentor, Gary visited 30 or 40 different schools so his practical knowledge of urban education is extensive. He explained that those experiences, combined with the fact that he is actually in an urban classroom before coming to the university to teach, has made the new role exciting, and he believes relevant, for the university students he is teaching.

I've recalled so many experiences that I saw as a mentor. Plus there are a lot of things that happen between 7:30 and 9:30 in the morning. I mean, Donna works the reverse situation, but there are a lot of things that will happen to me during the day at the high school that are just so appropriate for university class on the same particular day. It really is very exciting.

Gary is responsible for a seminar of approximately 18 students at the university and meets with them for three hours twice a week. In addition to teaching the seminar, Gary supervises his students in a field experience one day a week, meets

with them during established office hours and participates in a weekly seminar for all instructors.

PERCEPTIONS OF TENSIONS AND BARRIERS

Use of Time

The most difficult part of his first two months was also described by Gary as a worthwhile experience. The week before the quarter began at the university, the group of instructors assigned to teach the seminars had daily meetings from 9:00 to 3:30. Gary explained that the meetings were very beneficial and that he likely could not have survived the first few months without them. But the meetings also coincided with a crucial time period at the high school. As Gary explained,

When you're starting out a high school year and you're only in your third week, that's really not a good time to start leaving. If I had chosen the time I undoubtedly would have scheduled it some time late in August.

Another major tension identified by Gary has to do with the time required in planning for his classes.

The thing I do worst is plan. I feel like I'm really good at executing, but I'm a lousy planner. And all of the sudden I'm in a situation where I have to plan the equivalent of 15 periods a week at the high school plus my two three hour seminars, plus the field day experience, and I've got planning out my head.

When asked if he had to do the planning for the teacher that relieves him he replied,

I don't have to plan for her, but what I have to do is plan for a two hour block which is the equivalent of the old three periods strung together. When you have ninth graders, you've got to think of a lot of different things each

day because you can't keep them on a single task. For forty minutes I could wing anything, but for two hours you can't wing it.

The effect that the change in instructional time at the high school caused, combined with the planning required in teaching an entirely new course (to him) at the university, was the most overwhelming obstacle for Gary at the onset of his clinical educator experience.

My wife has said to me 'all you do is work,' and I know this first quarter is going to be extremely difficult because as I told you, I don't know the psychology involved in the university course.

Gary expressed concern that even when he was doing a lot of planning, there were often so many interruptions in his university class that the planning "went out the window." He finds that his students really want to talk about a variety of issues. However, the support Gary found within the group of university teaching associates helped him to "survive" the first few months in his new role and deal with such concerns.

Again, I think my salvation has been Jeri (the co-director of the program) saying, 'Look, the students can read the book themselves. They're responsible for the book. So the other things that they're concerned about -whether it's educational psychology or real life in an urban situation - well, it's probably worth more of the time.'

During the first quarter Gary estimated that he was devoting about 60 hours a week to his two positions. Monday through Wednesday alone is a forty hour week.

Last week I had my first set of papers to grade for the university students and I spent about five or six hours on them. As I was grading I thought, 'I really have to get going on planning for the high school and for the university classes.' Needless to say the weekend was a little overwhelming. But then again its exciting. It's not all bad. It's a lot of work, but so was the mentoring program...so is teaching.

Gary expressed concern that he didn't want to push so hard that he would "burn out", but was also convinced that if he just hung tough through the first quarter he would become more comfortable with the seminar material and life would indeed become much easier the second time around.

It's kind of like teaching. If I had a choice to do it again, by God I'd do it again. I'm looking forward to the second quarter. Hopefully, I'm going to be a better teacher at the high school and at the university.

His prediction proved to be true. As we talked during the second quarter, it was obvious that Gary was becoming more comfortable about his dual roles at the university and high school.

Mastering New Course Content

A major tension for Gary was walking into a teaching situation in which he knew very little about the actual content. Even though the course syllabus was provided to him, the actual material to be taught was new.

I'm finding that I know a lot more this quarter (second). I feel more comfortable with the content, but still have a lot of questions. I know what's on the test and sometimes I get a little frustrated because I'm not covering content and I remind myself, well you know your job isn't to teach content. Your job is to teach students.

Sense of Efficacy

Gary, like the other three participants, expressed a desire to know that he was making a difference. In contrast to the other clinical educators in the study, he seemed more confident at the end of the interview process that he had indeed made

positive contributions in his new role. One example has to do with the "stories" he shared about his urban classroom with the students enrolled in his seminar.

The students I have fit the profile of the typical prospective teachers to the "t". I mean, it's almost comical. I have 19 students. 18 are caucasian, one is oriental. There are no african-american students at all. There are 18 females and one male. Ninety percent of them are from rural, or in some cases, suburban schools. Most of them have no comprehension of what teaching in an urban setting is like. So I think the university's commitment to ensure that these kids aren't going to leave this place without a good taste of urban education is critical. I'm the person that is providing them with that first taste.

Gary also believed the students in his university seminar were having a good time. Many, he explained, have told him that his class is the first one they've had where they've been allowed to talk.

My students from last quarter called and told me they wanted to have lunch with me. I asked them questions about what we had covered last quarter and they remembered quite a bit. Maybe we're not going strictly by the outline, but we're covering the material.

PERCEPTIONS OF CULTURE AND CONDITIONS OF SERVICE

Sharing a Classroom

Unlike the other three participants who are elementary teachers, Gary's situation is somewhat more flexible in regards to release time logistics. Upon learning that Gary had been selected for the new role, the district assigned an English teacher who'd been staff reduced to replace Gary during his fifty percent release time. Gary describes his co-teacher as a very, very talented individual. He leaves the high school early and she comes in and takes the last hour of his class. As was mentioned

earlier, Gary's high school is a PDS project site. The school restructured their instructional time so that classes are offered in two hour time blocks. Hence, the two hour blocks necessitate "sharing" a class at the high school level.

The University Connection

The physical differences (parking, classrooms, sheer size) between the high school and university became even more clear to Gary after he began his second quarter.

I have all kinds of things that I bring to class...newsprint, markers, tape, posters. The first quarter was very nice because I was on the ag campus and you simply park 100 feet away from your building and you go in and that's great. This quarter I'm in one of the College of Education buildings. When I leave the high school I often don't get to the university until close to 11:00, which is when my seminar is supposed to begin. Well, my God I'm on the top floor of that parking garage every time. There are days when I go to the top floor and there are no parking spots. On Monday's, well everybody must have class on Monday because sometimes I just drive around until 11:00 looking for parking. On the first day of class I was supposed to be in room 385. Well, 385 is a broom closet. I had twenty-seven students show up, the capacity listed on the outside of the room says fifteen, and in actuality it looks like it will fit ten. The students sat on tables, chairs, and the floor that first day. Now, you'd think getting another classroom would be relatively simple, but not here. I was told I'd have to stay in that room until February. Well, we finally figured out a way to find a larger room, but the location varies every week. So the students and I have a room schedule for the quarter so that we can remember where we're supposed to be each week. It didn't make sense to wait for the bureaucracy to find me a stationary classroom.

In addition to parking and classroom space, Gary has also confronted a lack of office space where he can meet with students one-on-one or complete work that requires any concentration. All ten instructors are housed in the same room so Gary has found it impossible to get any work done in the office, let alone have privacy

with a student. As an alternative work area Gary has turned to the College of Education media center. He hides in the stacks when he's on campus and needs to get work done. The office, he explains, is for collegiality.

Gary also pointed out that if he were to serve in the same role again, he would want to have the same schedule as the other clinical educator. The two currently see each other for about fifteen minutes on Thursdays. It is impossible to have any sharing or in-depth conversation under those time constraints.

Another time conflict involves the Thursday morning seminars for all of the teaching associates. Because of his schedule at the high school, Gary misses at least the first hour of the seminar each week. Likewise, because of her teaching schedule, Donna needs to leave early. Both are present together for only 30 minutes. Gary expressed concern that he was missing out on the collegiality of those sessions. They always brought him up-to-date on what was discussed, but he was missing the essence of the seminars.

I tried a new teaching technique last week that worked really well. Another one of the teaching associates heard me talking about it and tried it in her class too. She said it worked great for her. I think it's nice being in this environment. I think you grow a lot as a teacher. I don't know whether it's because I'm in with this group of TA's who are interested in teacher preservice. I don't know whether the other clinical educators get that same type of stimulation or whether they work in the background.

In regards to the collegiality experienced while in the university and the orientation received concerning the program that he worked within, Gary was quite positive in describing his experience. However, Gary's experience involved interac-

tion with only one faculty member. His remaining colleagues were all graduate students enrolled in the College of Education.

Our training in this particular program was fantastic. In that respect the university couldn't have done any better.

Future Directions

Gary, more than any of the other participants, talked about what was yet to come regarding his career in teaching. Two reasons accounted for Gary's increased interest. First, he had recently participated in the peer review program in his district and had experienced the apprehension involved in returning to a classroom after having had a new type of leadership position in teaching.

Very few people wanted to go back into the classroom after working in the mentoring program. You just begin to see things differently. You begin to see a little more of the picture, other than what's going on in your classroom. If they told me that next year I would just be teaching two sections of English, I think I almost would feel a little bit let down. I mean, I'd really like to have another challenge. I'd like to do something different. I don't know what the conception of clinical educator is. Maybe the plan is to give these people two years and then encourage them to head towards their PhD. I'd like to think I could be a clinical educator for four, five, maybe six years. Then again I don't know. I mean it's such a great opportunity that maybe they, the powers that be, think well we ought to spread this around.

The second reason that could account for Gary's interest is the number of years of teaching experience he possesses. After twenty-four years in the classroom, he wonders if there aren't other contributions he could be making to the profession.

I'd like to think that I'm on a teaching ladder and there are going to be exciting things for me. Not that being in a classroom with twenty-five students is not a challenge or anything, it's just that I've done that for a long time. Ideally, I'd like to teach English a half day, and then spend the other

half day setting up learning networks among language arts teachers throughout the system. I wrote a proposal in that regard, but nothing was ever done.

Like JoAnn, who is the only other participant with more years of teaching experience, Gary used the word 'frightened' to describe his feelings about what lies ahead.

You know, I do have this fear that I'm going to go back to teaching five classes a day, one hundred eighty days a year, and I guess I'm a little frightened. Not frightened enough to get my administrative certificate. I'm really not interested in that. I'm a teacher. I'm very excited about this teacher ladder, career ladder because I want to stay in teaching.

SUMMARY

Gary, more than any other participant, appeared to have a greater role in translating information back and forth between the school and university. He made a concerted effort to relate what was occurring in his high school classroom to the lessons he was teaching at the university. Conversely, he articulated ways in which his teaching at the university was impacting his teaching at the high school. It was unfortunate that there never appeared to be an opportunity, or the possibility was not considered, for Gary to co-teach with university faculty.

Gary's interviews also exhibited a great deal of developmental growth as a clinical educator. Whether learning to deal with time constraints and the impact of time on planning, or developing a greater comfort level with the material he was teaching at the university, there was an obvious transformation during Gary's first six

months in his new role. He also displayed a great deal of adaptability in dealing (and coping) with university bureaucracy (e.g., finding a better classroom).

Finally, Gary's particular role afforded him the opportunity to interact on a regular basis with teaching associates at the university. It was apparent that he enjoyed the stimulation of those interactions and felt positive about the contributions he was making to the group. As an experienced teacher who has assumed previous leadership responsibilities in his home district, Gary views the career ladder concept as a way of staying in teaching rather than leaving teaching.

REFLECTIONS OF THE RESEARCHER ON PARTICIPANT PERCEPTIONS

The profiles have provided a detailed account of the clinical educator experiences and perceptions about their new and emerging roles. This section will draw from the profiles in order to respond to the research questions and depict the essence of the pilot clinical educator roles according to the researcher's perceptions.

Participant Characteristics

It should be noted that all four participants shared similar characteristics that served them well in their new and emerging roles. Each of the individuals can be described, based on the interviews and through direct observations, as self-starters and classroom innovators. The participants, at varying points during the study, each made reference to writing grants for their projects, serving in leadership positions peripheral

to the classroom, and trying new pedagogical practices long before any of their professional peers attempted to do so.

To a degree, they all shared a "pioneer sense of adventure". They each had a history of self-placement in new or challenging situations. Coincidentally, all four received a master's degree in education from the same university where the research study was conducted.

REFLECTIONS ON PARTICIPANT PERCEPTIONS OF TASKS AND RESPONSIBILITIES

Role Definition

All of the participants experienced varying degrees of difficulty dealing with what they viewed as an ambiguous role. The two who expressed the least amount of concern (Carol and Gary) had both been through a formal teacher leadership program prior to assuming the pilot clinical educator role. Both also described a more structured, supportive and focused environment in which to experiment with their emerging roles.

An analysis of the role descriptions shared across participants is provided. An important point to remember is that Gary's role, in relation to the other three participants, was not directly tied to a Professional Development School Project. The unique aspects of his experience will also be incorporated into the discussion.

"PDS Linchpin"

Karen, Carol, and JoAnn were each directly tied to a PDS project and played an integral role in "keeping the wheels turning." In many cases they were not only the gas that fueled the PDS engine, but they were also responsible for the maintenance, driving and navigation. From the smallest (but important) details of scheduling meetings and completing paperwork, to facilitating PDS seminars and supervising student teachers, each of them was a steady force in what can be described as fragile and somewhat tentative project initiatives.

Conversely, Gary was plugged into an already established program at the university. His participation took on more of the role enhancement. If he were to leave next year, the program would continue. If Carol, JoAnn, and Karen were to leave their positions, with no replacements, their respective PDS projects would be severely handicapped. Each has carried a heavy load of responsibility during the past six months.

Salesperson

Each participant, to a certain degree, has been required to articulate the purposes and benefits of increased collaboration between the university and schools. In most instances they have found their primary audience to be teachers; teachers who need to be convinced that an investment made in PDS participation will have a high return. Two secondary, and important audiences have been parents and administrators. Both groups see PDS projects as being a change from the "normal

routine" of schooling and want confirmation that the change is good. Of course, the dilemma that clinical educators faced was that they couldn't base their "PDS change is good" response on specific research data. Their advocacy role was based on personal beliefs that increased collaboration and communication among teachers, administrators and university faculty and increased reflection on one's practice would enhance the learning taking place in their classrooms and schools. Only two of the four participants ever made direct reference to the Holmes principles as a framework on which to base their "sales pitch."

School-Based Teacher Educator

Each participant, in varying degrees, worked with pre-service students during the pilot clinical educator experience. Karen and Carol both taught methods courses and supervised student teachers in the field. JoAnn helped to facilitate the placement of field experience students in her PDS project sites. Gary taught introductory courses at the university for students interested in entering education and supervised the students' first field experiences.

Karen's work as a school-based teacher educator was constrained by confusion over purpose. Her clinical educator role description emphasized co-coordination of the PDS project and professional development of teachers. The co-coordinator role was relatively straight forward, but Karen was never able to fulfill the second formal responsibility. This inability was due to several factors; first, the PDS project participants lacked a clear focus which prevented Karen from being formalizing a

plan for the professional development of project teachers; second, time demands were a constraint in that the sheer hours required to teach half-time and co-coordinate the project were enough to fill each day; third, confusion about roles, and even "turfdom" issues, arose with the graduate TA's involved in the project and who were responsible for working with students and cooperating teachers; and fourth, Karen did not feel as though she possessed all of the skills or knowledge base required to prepare and conduct professional development activities. When asked if part of her clinical educator role could be used to make cooperating teachers more effective, she replied, "yes, but I don't know how to go about doing that." The absence of a TA for one quarter allowed Karen entry into PDS teacher classrooms and led to her feeling more comfortable about assisting with the supervision of student teachers.

JoAnn was even less involved than Karen in the teacher preparation program at the university. Her involvement evolved around coordinating field experience students in the two schools that were part of her PDS site. The coordination took a great deal of communication and persuasion with the university methods teachers. Rather than a school-based teacher educator, JoAnn's involvement and position were directed more at "brokering" conditions of student placement between university faculty and classroom teachers. Because of JoAnn's role, the teachers in the schools had an impact on the field experience placements. There is no question that JoAnn's presence made a difference, but her responsibilities did not involve programmatic involvement with preservice teachers or cooperating teachers.

Of the three clinical educators directly tied to a PDS project, Carol had the most direct involvement working with student teachers. She assisted with their placement at her school site, she observed their teaching, she conferenced with them regarding their progress, and she had teaching responsibilities in the methods courses.

Gary's role involved teaching an undergraduate section in the Professional Introduction to Teaching Program at the university. His entire release time revolved around planning for the class, teaching, supervising field experiences, and evaluating student progress. Unlike the other three participants, Gary was not expected to "feel" his way into a school-based teacher educator role. He was handed a syllabus and given a teaching schedule for each quarter. Granted, Gary experienced apprehension and frustration about his new role at the university, but he was not required to "create" the parameters of his involvement in teacher preparation like the other three participants.

PDS Historian and Secretary

Common to the first three participants are tasks and responsibilities that can best be described as secretarial in nature. From scheduling and planning meetings, typing and distributing PDS informational bulletins, and collecting and filing all materials related to the evolution and day-to-day operation of the PDS, the clinical educator position is the one to which all PDS participants have turned for clerical and organizational support. The tasks assumed by participants were time consuming and created tensions about their "proper" role designations. Each had to deal with

balancing what were visible, day to day operational needs of the PDS projects with their own sense of efficacy and professional contributions to the emerging roles.

Carol seemed to assume the least amount of these types of responsibilities, JoAnn the most, and Karen was somewhere in between. The degree to which they assumed such tasks was also contingent on their school site situation, the people they worked with in the PDS project, and their own set of priorities.

REFLECTIONS ON PARTICIPANT PERCEPTIONS OF TENSIONS AND BARRIERS

With any new task or responsibility, certain apprehensions or tensions may arise. The following categories represent the major issues raised by clinical educators in regards to their perceptions about the tensions and barriers associated with their pilot roles.

Time

Serving in this role has affected my personal life through its extraordinary demands of time. Many days are ten to twelve hours in length.

Of all the tensions experienced in these newly emerging roles, the use of time was the most visible and frequently discussed among the clinical educators. Their first encounter with the inter-relatedness of the new roles and time was when we scheduled our first interviews. The participants suddenly realized that their days were no longer set by class periods from morning until afternoon. Several commented to me that they felt awkward being away from school in the middle of the day to meet

with me. It was actually enjoyable to see them become more and more comfortable with the time flexibility the new roles afforded them. By the end of the study, all had become quite accustomed and appreciative of the time that was "their own."

Another major issue related to time was the clinical educators' concern about planning for classes. They all expressed uneasiness about getting course planning done in half the normal amount of time. Gary, in particular, felt the planning time crunch. Not only had the class schedule at his high school been altered (which greatly affected how he planned for classes), but he was also planning for two seminars at the university that he had never taught before.

The thing I do worse is plan. I feel like I'm really good at executing, but I'm a lousy planner. And all of the sudden I'm in a situation where I have to plan the equivalent of 15 periods a week at the high school plus my two three hour seminars, plus the field experience day, and I've got planning out my head.

As the year progressed, the concerns voiced initially about planning time became less important. Part of their adaption to the new role and responsibilities included trying to look at things differently. What had always been done before in regard to their planning time was not necessarily the way it always had to be. Carol, as an example, resolved herself to the fact that serving in this new capacity simply meant priorities needed to be made and it was alright if the priorities changed,

My schedule seems to be more manageable in the way we've worked it out. I always have more things than I can possibly do and I'm starting to get comfortable with that being alright.my priorities often get reoriented because of things that happen....

Institutional Bureaucracy

A very obvious and tangible barrier described by clinical educators involved access to the university. Whether access was defined as finding a parking spot, using the library, or locating a space on campus to work, the physical barriers confronted by participants sent a clear message to all of them; they were not viewed as faculty and were not entitled to the "amenities" afforded to their colleagues on campus. The tensions and barriers identified by participants were probably not as problematic for them as they could have been; each had received at least one degree from the university and so were accustomed to many of the inconveniences.

Ambiguity of Role

Karen, Carol and JoAnn all described the ambiguity of their clinical educator role as problematic. Carol appeared to adapt to the "vagueness" associated with the emerging role more readily in that her role descriptions became much more concrete as the study progressed. Karen and JoAnn, however, were more hesitant about their specific responsibilities within the PDS except for the types of coordination activities described earlier under the title "PDS Historian/Secretary". Aside from the fact that these were completely new role designations for classroom teachers, the confusion over role definition may have been due to a lack of focus or direction within the PDS projects, the interrelationships with other key participants in the PDS projects, and the degree to which each participant had experienced any formal leadership training.

Status

Aside from the fact that professional teaching colleagues were either jealous or apathetic, university faculty not directly involved in their PDS projects were disinterested, and building principals maintained a "hands off" approach to having a clinical educator in their building, the four participants felt pretty positive about their status. Sarcasm aside, status was a very real issue for each participant. Their perceptions of status could be compared to feeling like a new species on exhibit at the zoo or a patient quarantined with a contagious disease.

Again, having a supportive PDS team made the uniqueness of their role more positive than negative. The strength of the connections within the PDS project, or in Gary's case, the university sponsored program area, made the difference. All but one participant felt that the environment in which they were located was supportive and minimized the tension created around status and position.

Sense of Efficacy

Participants continually worried about whether or not they were making a positive difference in their schools, their districts, and the university programs with which they were associated. Each participant, as a responsible and dedicated professional, wanted to see the role be viewed as successful. An additional concern was raised by every participant; a concern regarding the added responsibility of doing a good as the first teachers selected to serve in the newly established roles. Each believed in the potential benefit of their new roles and the overall contribution they

could make to all participants of the Professional Development School project initiatives.

Parental Concerns

Only one of the participants (Karen) talked at length during the interviews about the reaction of parents to her new role. Her students' parents were extremely concerned initially about the fact that she would only be in the classroom half-time, and that a beginning teacher would be her replacement.

A valuable lesson was learned from her experience. First, the parents not only wanted an explanation about the new classroom arrangement from the clinical educator, but they also wanted to hear from someone at the university. The faculty member involved in the PDS project played an important role in helping to alleviate parental concerns and in explaining the changes that were to take place during the year. Second, the fact that parents wanted to hear from the university, and not the clinical educator (in her view) was also enlightening. Karen did not even have to step foot on campus to experience tensions regarding hierarchy and status. Finally, the experience with parents resulted in the compilation of an informational packet on collaboration, the PDS initiatives and clinical educator roles. Karen had the packet readily available for any interested parent.

Future Directions

Every single participant expressed a desire to continue in the clinical educator role for a second year, especially the participants with greatest amount of teaching experience. Only one indicated that returning to the classroom full-time would be satisfying. The other three expressed concerns about returning to their regular teaching duties.

I would like to keep doing this..I really would. I'm a little frightened at times because I don't know about going back to teaching full time.

One clinical educator's reasoning behind not wanting to return to full-time teaching was that she didn't want all that she had learned through the PDS initiative to be wasted.

I would really like to have some role created where I could work with teachers utilizing the information I've learned through my PDS involvement. If I go back into a classroom you become, well, all of our time is spent in your classroom and that doesn't get back out.

None of the participants expressed any desire to pursue work in educational administration. Their interests were all directed towards the professional development of teachers and the preparation of preservice students.

REFLECTIONS ON PARTICIPANTS' PERCEPTIONS OF CULTURE AND CONDITIONS OF SERVICE

One of the more unique and challenging aspects of the pilot clinical educator experiences was the variety of settings, cultures and conditions within which each participant had to interact. The clinical educators found that flexibility and

adaptability were key attributes to overcoming, or at least dealing, with some of the frustrations of their initial experiences.

Sharing A Classroom

Because I'm an elementary school teacher the big challenge for me, and I thought about this all summer long, was that if this role happens and I'm selected, what will happen in my classroom and how will that look? My immediate concern and my first concern was the quality of my classroom I couldn't have hoped for anything better than what I see happening now.

The elementary school teachers in the study found that sharing a classroom was a much more positive experience than any had anticipated. Two of the participants, both of whom were experienced practitioners, were teamed with first year, novice teachers. In both instances the clinical educators expressed satisfaction about their new, and experimental, classroom situations.

I am her mentor teacher by far. We talk every day about why things work and why they don't work or her. What to do about this student or that student. We keep saying it's really unfortunate that we can't just put two classroom teachers together, a new teacher and somebody more veteran, and let them stay in the same classroom all year and have this kind of experience.

Carol and Karen both indicated that the value of making one's practice explicit to others was immeasurable. Articulating personal beliefs about learning and classroom instruction served as an added professional development experience for both clinical educators.

Sharing a classroom was mentioned only briefly by Gary and JoAnn. First of all, the teachers assigned to work with them were both experienced practitioners. In JoAnn's case it was a peer teacher who had taught in the same building for quite

some time, but who requested half-time status for the year. Gary's counterpart had been staff reduced over the summer and felt fortunate to find a half-time teaching position. Gary and JoAnn seemed to work in parallel with the teachers sharing their classroom, as compared to Carol and Karen who worked to make their shared classroom experiences as collaborative as possible. School and classroom philosophies, grade level, school climate, individual personalities and teaching styles, and subject matter all impacted upon the shared classroom experiences of the clinical educators in this study.

Peer Perceptions and Home School Setting

As the researcher, I was disheartened to find that the clinical educators tended to be the "best kept secret" in their respective schools. Gary and Karen were particularly "invisible".

Gary, of course, was not tied to a PDS project involving teachers at his school. The bulk of his responsibilities took place away from the high school. The only time Gary was visible to peer teachers was when he brought undergraduate students to the high school for field experiences.

Karen's teaching colleagues (the handful in the school who knew about her appointment) reacted to the new role by extending their congratulations, asking about her time schedule, and moving to another subject. As was pointed out in her profile, the principal never recognized Karen's new professional responsibilities in a public forum, nor were any written notices distributed to faculty or staff members in the

school. Other than talking with one or two teachers who expressed an interest in obtaining more information, or help with student teachers, Karen's new role went relatively unnoticed in her elementary school. She was actually much more visible to PDS teachers in other school buildings by virtue of her classroom visits, the "PDS night", and her supervision of student teachers.

In contrast, every staff member at Sutter Creek Elementary knew of Carol's appointment and the majority utilized her abilities in a variety of ways. Carol had a history of leadership responsibilities in the school building (and district) and had been instrumental in initiating the PDS project. Carol was also visible to teachers in the building because of her responsibilities with the strand of preservice students placed at the site. Of all the participants, Carol was the only one who made a specific point of meeting with district administrators on a regular basis to inform them of her clinical educator and PDS related activities.

Like Carol, JoAnn's new role was widely recognized and acknowledged at Lincoln elementary, but for different reasons. JoAnn was the main disseminator of PDS information for her project. She knew when PDS meetings were scheduled, how to register at the university, where to find a syllabus for the PDS class, and how many field experience students were to be placed in the two buildings. By virtue of being the "PDS informant", teachers in the PDS knew who to seek out for assistance and answers.

The University Connection

The isolation and invisibility experienced by the participants in their own school site was mirrored to a certain degree at the university. Each participant couldn't say enough about the positive feelings associated with the faculty members connected to their PDS projects (which totaled four), but those individuals were the only faculty contacts made thus far. Considering the fact that there are over 140 faculty members in the College of Education, the influence of clinical educators, on the surface, appeared to be about as significant as adding a drop of vanilla to two quarts of unflavored ice cream. The flavor just doesn't come through.

Attempts were made by the College to include clinical educators in activities such as Dean candidate interviews, research retreats, and quarterly college faculty meetings. In fact, the first nine clinical educators to be appointed were introduced to the faculty at the Fall meeting. The participants expressed appreciation that such efforts had been made, but emphasized that the invitations only scratched the surface of the inclusion problem.

I don't think we're setting up paths for interactions between clinical educators and faculty members outside of our own PDS projects. I think each clinical educator has a department in which they could have influence.

Gary, being the one participant who spent the majority of his "clinical educator time" on campus, was extremely pleased with the reception given to him. He emphasized during our interviews that he was made to feel very welcome from his initial visit to campus. He also expressed satisfaction that the urban classroom

experiences he was bringing to the university program were valued and incorporated into the professional development activities of his fellow teaching associates.

The PDS Connection

The experiences of Karen, Carol and JoAnn with teachers in their respective PDS projects can best be described as varied. Each of them encountered unique challenges and responsibilities apart from one another. At the same time, certain similarities connect the three. All three had major responsibility for organizing and planning the off-campus courses associated with the PDS projects. All three worked closely with faculty members to coordinate the work of the PDS projects. All three made attempts to visit PDS teacher classrooms in each of their PDS sites.

CHAPTER V

SUMMARY, CONCLUSIONS, IMPLICATIONS, AND RECOMMENDATIONS

This chapter includes a summary of the study, a statement of conclusions, and a discussion of their implications for practice. The chapter concludes with recommendations for further research.

INTRODUCTION

The reporting of this study began by sharing an Aesop's fable with the reader; a fable which suggested that creative and effective solutions are often devised for serious problems, but that the implementors of such solutions are frequently sacrificed during the process. In other words, the risk involved in implementing solutions is comparable to a meager little mouse attempting to "bell a cat".

One of the more popular solutions to the nation's challenge of reforming its public education system has been to propose the creation of more collaborative and authentic relationships between schools and universities, while at the same time establishing new roles for teacher leaders. This study described the experiences of four courageous teachers who dared to implement a creative new "solution". They dared to "bell the cat" and assume the role of clinical educator.

SUMMARY OF THE STUDY

The study was guided by a body of literature that encompassed four major areas. First, an examination of what had "come before" relative to reform movements in teacher education was completed. A review of the current reform arena and school-university collaboration was also provided in order to contextualize the study. Recognizing that the field of education has often been able to identify weaknesses but has been unable to move in a positive direction to strengthen those areas, a review of the well-documented tensions in teacher education was provided. Those tensions included status, programmatic coherence, culture, and the supervision of student teachers. The third major area focused on a review of how contemporary clinical faculty designations were being used in institutions around the country. Teacher leadership was the fourth and final area of focus in building the conceptual framework for the study.

Using the literature as a framework upon which to build a set of research questions, the researcher sought to examine and record the experiences of four teachers who assumed pilot clinical educator roles. The creation of clinical educator roles was a direct result of a Professional Development School (PDS) Project initiative between a major land-grant research university and the school districts in the surrounding metropolitan area.

CONCLUSIONS

Tasks and Responsibilities

The roles assumed by the four participants in the study shared common characteristics. The majority were the "glue" that held the PDS projects in which they were involved together. They were the common thread, the center of gravity, the "linchpin."

Other tasks and responsibilities focused on working with university teacher preparation students in local school sites, encouraging teachers to become involved in the work of the PDS, and working collaboratively with university faculty on PDS projects, methods courses, and professional development activities for teachers. One participant spent the majority of his clinical educator time teaching undergraduates at the university. Another spent the majority of her time facilitating the work of the PDS project in a local school site. While common descriptors such as "salesperson", "PDS historian", and "school-based teacher educator" can be used to identify the multiple roles assumed by participants, it must also be noted that the roles created by each were as unique as the individual, their home school and district, their previous professional experiences, and the PDS project in which they were situated.

A handwoven blanket may be made of one-hundred percent wool, a common indicator of warmth and durability, but the uniqueness of the threads in color and design is what makes the blanket special in its owner's eyes. Common threads of the clinical educator role incorporated a blend of personal characteristics such as innovation and motivation and years of professional practice with the role descriptions

of salesperson, meeting planner, historian and teacher educator. The uniqueness resulted in how the clinical educators utilized their personal and professional strengths, their school and university resources, and their individual leadership abilities.

Tensions and Barriers

There is no question that the emerging roles created a unique set of tensions and barriers, many of them commonly experienced across all participants. Some, like university bureaucracy, were so institutionalized that techniques to "get around" the barriers were likely to be more effective than trying to change the barriers. An example would have been to ensure that all clinical educators were provided a university parking permit. Another would be to provide technical assistance to the clinical educators and PDS projects so that the majority of clinical educator and faculty time is not spent duplicating materials and mailing notices. Others, such as status at the university and the use of time, should improve as increased collaboration and communication between schools and universities continues and the clinical educator roles are more fully developed. Simply creating an awareness that there is a problem with status and a heavy demand on the clinical educators' personal time is a step in the right direction.

Culture and Conditions of Service

The tensions and barriers identified by participants were very often the result of having one foot in the university and the other in the schools. The "bridge" created by clinical educators was one that endured a major degree of stress. Strategies for dealing with the issues of living in different cultures and settings are directly related to the ability of PDS participants to reconceptualize roles and relationships.

More importantly, a significant factor in the success of PDS projects and the implementation of clinical educator roles is the support of "middle management." Even though school district superintendents, presidents of educational associations, the leadership of the college of education and members of the PDS Policy Board have endorsed the concept, that support has not been fostered throughout the schools and college. A significant amount of work is left to be done in order to ensure that a greater percentage of stakeholders are believers in the PDS concept.

A second significant factor in the success of clinical educator roles is leadership development activities. Whether proven leadership experiences are incorporated into the clinical educator selection process or provided to teachers selected to serve, the data suggest that those unique skills and abilities commonly associated with leadership are crucial to the successful implementation of these new and emerging roles. An outstanding teacher is not necessarily synonymous with an effective clinical educator.

IMPLICATIONS FOR PRACTICE

Surviving the First Year

Numerous factors influenced the participants' abilities to assume and implement the emerging clinical educator roles. A professional and personal support system, the home school climate, the university faculty with whom the clinical educators collaborated, the members of the PDS team, the support or interference received from principals, and prior leadership experiences all impacted, in varying degrees, on the pilot experiences of clinical educators.

Support Systems

Each participant utilized a different type of support system that eased the tensions and struggles experienced in the new role. In one instance, a support group was a natural part of the setting. Gary walked into an environment where he had eight other "comrades" teaching the same course and experiencing the same schedule. There was an immediate sense of belonging. Karen had strong ties built within her PDS. These relationships were a result of a project that had formed two years prior to her assuming the clinical educator role. The support net that was missing in this initial experience was the opportunity to talk to fellow clinical educators. Participants met periodically at college of education functions throughout the year, and two formal meetings were held for the entire group of clinical educators. Greater efforts, however, need to be made to create a cohort of these professionals. A year long seminar, or colloquium, may be considered so that the clinical educators could come

together on a regular basis not only to share "war stories", but to further their own professional development.

The home school climate was a factor in viewing clinical educator roles in their entirety. Whether it was release time logistics, the hiring of a co-teacher, or the lack of interest in their role exhibited by a school principal, the home school climate impacted on the clinical educators and whether they functioned at full potential. One participant's manifestation of the role could be described as tentative and fragile; characteristics that if not directly attributable to the principal's actions and attitudes, were at least complicated by them. Although difficult, if not impossible, to consider as selection criteria, the climate and degree of support from potential clinical educators' home schools and districts may warrant further examination.

Participants who worked directly with a PDS project also worked directly with one university faculty member. In each instance there was a feeling of mutual respect and cooperation. Conscious efforts were made to remove any vestiges of hierarchy. Both the university and school professionals indicated that the experience had been beneficial and one that they hoped would continue in the future.

The Teacher Leadership Component

Prior leadership experiences came to bear in the emerging clinical educator roles. Mertens and Yarger point out that,

...the challenge for teachers who have been promoted to the top is finding something for them to do that will distinguish them from their colleagues in such a way that their positions are respected, internally and externally.

Whatever it is they do should be important, needed, and valued; require a high level of expertise; and have visibility beyond the classroom context.

The participants who had experienced prior leadership development activities were better able to meet the challenge presented by Mertens and Yarger. Their profiles described situations where their professional expertise was utilized, i.e. urban teaching experiences and working directly with student teachers in the classroom, where they were visible to peers beyond the classroom.

Barth (1991) points out that special process skills must be required of individuals forming collaborative groups. Running effective meetings, building consensus, securing and utilizing resources, developing action plans, and evaluating outcomes are skills not easily achieved. Only one of the participants exhibited confidence in his/her ability to complete such tasks, and that individual had completed a formal teacher leadership program within the home school district and in partnership with the university. Such abilities could certainly be developed in the other participants. In fact, they often experimented with such responsibilities and were successful, but their attempts were sporadic and the experiences were never articulated as an expectation of their role. All four participants exhibited leadership in the sense of generating enthusiasm and commitment within their projects. By approaching clinical educators as a cohort, leadership development activities could be an intentional and planned component of any professional development program.

Overcoming Tensions and Barriers

Some recommendations for overcoming identified tensions and barriers are rather straight forward. First of all, clinical educators should all be made to feel as though they have access to the university. The most obvious example of access is finding a place to park one's car. Parking permits should be an automatic "perk" of selection as a clinical educator, as should a university identification and library card. A second example of access involves work space. A wonderful work area was provided to clinical educators and PDS projects off-campus. The space is one of which many university faculty would be envious. Clinical educators, however, see the space as another means of isolation. A recommendation would be to keep the work space, but improve the perception clinical educators have regarding their detachment from the college. Greater efforts at integration could be achieved by inviting clinical educators to participate in faculty meetings, research retreats, and other college/university functions. Simply placing their names on the faculty mailing list could facilitate communication and a sense of inclusion. Finally, whenever possible technical assistance in the form of clerical support should be provided to the PDS projects and clinical educators. Such support will free the clinical educators from doing tasks that are viewed as quite necessary to the work of the PDS, but that do not fully utilize the talents and abilities of the individuals selected to fill these roles. Clinical educators have been selected because of their pedagogical expertise, not their ability to duplicate materials.

Time was another major barrier identified by participants. Time was mentioned much more often during initial interviews than it was towards the end of the data collection process. Time may have been mentioned less often later on because the participants had begun the process of reconceptualizing their teaching roles. They began to recognize that their new and emerging roles could not be "tacked on" to what they were already doing in their classrooms. Participants not only worked to create a clinical educator role, but they also worked to recreate their classroom teaching role. Future clinical educators could greatly benefit from hearing and learning of the changes that took place in the participants' classrooms this year.

Reevaluating Conditions of Service

An exciting aspect of the clinical educator role, and one that was an unexpected outcome of the study, was the positive experience expressed by participants regarding sharing a classroom with another teacher. As one participant explained,

Through co-teaching I have had the opportunity to articulate on a daily basis both my philosophy and practice. Sustained collegial interaction is now a more regular part of my teaching experience. My own professional development is being enhanced.

In addition to enhancing the professional development of the clinical educators, the opportunity for two beginning teachers this year to share a classroom with experienced and talented practitioners is immeasurable. The implementation of clinical educator roles actually resulted in the implementation of an individualized

induction/mentoring year program for two novice teachers. In searching for ways that the clinical educator role could benefit their districts, participants coincidentally found that mentoring beginning teachers was a significant contribution. The reconceptualization and interrelatedness of roles is an area that requires further examination and discussion among all parties of the PDS initiatives.

A more ambiguous area concerning the conditions of service was best described by one clinical educator who said,

It's difficult to deal with the emotional tension of being on the outside everywhere.

Participants all felt as though they didn't quite fit in any one particular place. Not only does this relate again to the importance of creating a supportive cohort of clinical educators, it also represents how difficult it is to move, restructure, or change the field of education when viewed in its entirety. It would be naive to think that all teachers, administrators and university faculty would welcome new roles such as those described in this study. It would be equally naive to think that clinical educators could tackle the indifference, the isolation and the detachment experienced with new roles on their own. The participants in this study survived this difficult aspect of their new and emerging roles because they were strong and committed individuals who helped themselves by creating individual support systems. Not one participant had a school principal who took an active advocacy role in their behalf. Only one participant felt as though the teachers in her home school were supportive and knowledgeable about her new leadership role. Not a single participant had any

interaction beyond a casual greeting with a faculty member of the university outside of the one individual with whom they worked in the PDS. The sense of "not belonging anywhere" needs to be addressed. Individual school buildings and districts and departments within the college of education should feel very fortunate, and in fact should work towards having a clinical educator associated with their program.

RECOMMENDATIONS FOR FURTHER RESEARCH

Much has been learned from the study of pilot clinical educator roles and much is left to study. The data collected point to a number of areas open to further examination.

Should clinical educators be provided with specialized professional development activities before assuming their new role? What would be the major areas of focus: leadership development activities; mentoring skills; developing a full understanding of the Holmes documents and the goals of the College with whom they'd be working?

How can clinical educators be more fully integrated into programmatic areas at the university?

If clinical educators are to focus primarily on the responsibilities of a school-based teacher educator, who assumes the "coordination" responsibilities of the

PDS projects? How can those types of responsibilities be avoided by clinical educators?

Does being an expert in the classroom denote expertise in helping someone learn how to teach? What impact do these areas of expertise have on the clinical educator selection process?

What future professional development activities should be afforded to clinical educators? Is there a way to "cycle out" and still be afforded new challenges and opportunities?

How can clinical educators become more visible within their school building and district? In what ways can they be better utilized? What types of school support could be expected?

What role does the school principal have in assuring the success of clinical educators? What, specifically, can they do to foster new and emerging roles for teachers?

Should the climate of one's home school be considered in the clinical educator selection process? Should clinical educators only be selected if they

reside in schools that already meet many of characteristics explicated in Tomorrow's Schools?

SUMMARY

The four participants who volunteered to "bell the cat" and assume pilot clinical educator roles are outstanding individuals and talented professionals. Their special abilities, enthusiasm, persistence and leadership are to be commended. The study raised more questions than it answered. New roles and opportunities for teachers are just one of many exciting prospects for educational renewal and reform in this country. The profession is fortunate to have the types of individuals portrayed in this study who are willing to take risks and serve as pioneers of experimental new roles. From this researcher's vantage point, the four teachers who volunteered to participate in this study were truly successful in "belling the cat."

APPENDIX A

INTERVIEW GUIDELINE

INTERVIEW GUIDELINE

1. **Please tell me about yourself (hometown, family, education, previous teaching positions, etc.)**
2. **Why did you decide to become a teacher?**
3. **Why did you decide to apply for the clinical educator position?**
4. **Tell me about what you've been doing in your new role. What is a "typical" day like for you?**
5. **What has been the most difficult part of this new role thus far?**
6. **What has been the best part of this new role thus far?
(This question lead to a great deal of discussion about sharing classrooms)**
7. **Tell me about your PDS project. What is the focus? How do you fit in?**
8. **What's it like to work with university faculty members?**
9. **Describe to me how you think you're being perceived by the teachers in your school; in your PDS project; by university faculty; by your principal.**
10. **What do you hope to be doing next year? Five years from now?**

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